EDI Gateway Technical Communications User's Manual

Version 3.8

August 2008

Disclaimer

We publish this manual for informational use only. We periodically make changes to the information in this manual. We will incorporate these changes in new editions of this publication. EDI Gateway may make improvements and/or changes to this publication at any time.

Revision Log

We have recorded revision numbers, version numbers, dates and brief descriptions of the purpose for revision below. As we make revisions, we will number them consecutively beginning with 1. Following a thorough review of all material included in a revision, please discontinue use of or destroy all prior versions of this document.

Revision Number	Version	Date	Description
1	2.00	Feb 2003	
2	2.01	May 2003	X12N version 4010A1 updates, EDIG proprietary report changes, FTP telephone number change.
3	2.02	July 2003	Update to the enrollment form, FTP instructions, connectivity options, NDM instructions, changes to the additional information for trading partners page
4	2.03	August 2003	Change to inbound envelope instructions.
5	2.04	September 2003	Changes to the enrollment form to require vendors to identify provider customers.
6	3.0	May 2005	New release
7	3.1	July 2005	Name change to BlueChoice® HealthPlan (formerly Companion Healthcare), Payer list update, TCPIP and LU6.2 Connectivity options added.
8	3.2	February 2006	Changes to reflect test environment schedule. Document conversion to PDF format, removal of verbiage related to prior MS Word format, added hyperlink to enrollment form, added fields for clearinghouse/software vendor entry to Thumbs Up Certified Vendor list, removed NCPDP information and changed footer.
9	3.3	May 2006	Added After Hours/On Call fields on enrollment form. Added info to SFTP, VPN and NDM connectivity about 1000 byte file length. Added info to SFTP about SSH2 / SecureFX and Sunday testing of connectivity.
10	3.4	June 2006	Changed Sunday connectivity testing time to after 10:00pm ET. Date in footer removed since it's on cover and kept current in revision log. Added fax number and after hours TSC phone number.
11	3.5	March 2007	Changed name of TPA Employee Benefit Services to Employee Benefit Administrators. Changed BLKSIZE to 27000. Removed after hours TSC phone number. Changed processing time for SFTP to 7 – 14 business days. Changed TIN for Instil. Added Health Net® TIN. Updated address for Palmetto GBA.
12	3.6	March 2008	X12N 276 transaction has LU6.2 /TCPIP connectivity available. Added Humana Veteran Healthcare Services to Receiver ID listing.
13	3.7	May 2008	Added column in BlueCross EDIG Trading Partner Enrollment Form for NPI #. Removed State and Add/Change/Remove columns.
14	3.8	August 2008	Changed FTP Dial-up IP address for production and test.

Please Note: The *EDI Gateway Technical Communications User's Manual* is subject to change as we continue to enhance our services to you. This manual is available via the Internet on the SouthCarolinaBlues.com Web site in the HIPAA Critical Center. Please follow this link -- http://www.southcarolinablues.com/HIPAA Critical Center -- and look for this manual under the "Technical Information" heading.

If you have any questions or concerns with this manual, please contact edig.ops@PalmettoGBA.com.

BlueChoice HealthPlan is a wholly owned subsidiary of BlueCross BlueShield of South Carolina. Both are independent licensees of the Blue Cross and Blue Shield Association.

Table of Contents

About Us / Introduction

Welcome to the BlueCross BlueShield of South Carolina EDI Gateway. This document offers instructions for submitting electronic transmissions to the BlueCross commercial lines of business and PGBA TRICARE. It includes information about our trading partner enrollment process, gateway connectivity options and HIPAA transactions specifics.

EDI Gateway processes electronic transactions for the following BlueCross subsidiaries:

Healthcare Payers
BlueCross BlueShield of South Carolina
BlueChoice HealthPlan
Instil Health
PGBA, LLC (TRICARE)

Third Party Administrators
Carolina Benefit Administrators
Employee Benefit Administrators
Planned Administrators, Incorporated
Thomas H. Cooper & Company

Companion Companies
Companion Life Insurance Company

EDI Gateway's production environment is accessible 24 hours a day, seven days a week, with the exception of weekly maintenance performed Sundays between 3:00 p.m. – 10:00 p.m. EDI Gateway's test environment is accessible Monday through Saturday 5:00 a.m. – 10:00 p.m.

We send notifications of EDI Gateway outages to trading partners via e-mail. We generally send notifications of scheduled outages with two days prior notice. We send notifications of unscheduled outages as quickly as the outage is reported.

Please call the BlueCross Technology Support Center at 803-736-5980 or 1-800-868-2505 with questions or to report problems.

Additional information is available via the Internet at www.SouthCarolinaBlues.com for BlueCross' lines of business and www.MyTRICARE.com for PGBA, LLC (TRICARE).

Trading Partner Enrollment

Trading Partner Enrollment Form

The purpose of the *BlueCross EDIG Trading Partner Enrollment Form* is to enroll providers, software vendors, clearinghouses and billing services as trading partners and recipients of electronic data. It is important you follow these instructions, and complete all the required information. We will return incomplete forms to the applicant, which could delay the enrollment process.

The enrollment form can be found at the back of this manual in the Appendix and is also available via the Internet at http://www.southcarolinablues.com/enrollmentform.You should complete enrollment forms electronically. Use your TAB key to move forward through the form fields or click your cursor in a desired field or box. Be sure to save the file after you have completed the form.

If you are a prospective BlueCross commercial, BlueChoice HealthPlan, or Instil Health payer trading partner, print and mail a hard copy of the completed form to:

> BlueCross BlueShield of South Carolina
> Technology Support Center: EDI Enrollment
> I-20 at Alpine Road, AA-E05
> Columbia, SC 29219

If you are a prospective PGBA LLC (TRICARE) trading partner, e-mail the completed form to edig.ops@PalmettoGBA.com. Or, you can fax a copy to (803) 763-4954 or print and mail a hard copy to:

> Palmetto GBA
> Attention: EDIG Operations, AG-280
> 2300 Springdale Drive, Building One
> Camden, SC 29020-1728

EDIG Operations will acknowledge receipt of your enrollment form via e-mail within four business days.

This table will help trading partners complete the enrollment form:

Form Field Name	Instructions for Field Completion	Req.
Date	Enter today's date.	1 2 3
Action Requested:	Indicate the action to be taken on the enrollment form. Note: Depending on the requested action, different fields of this form are required. These are identified in the column at right.	
New Trading Partner ID	1. To apply for a new Trading Partner ID, check **New Trading Partner ID**.	1
Change	2. To change Trading Partner information, check **Change**.	2
Cancel	3. To cancel your enrollment, check **Cancel**.	3
Trading Partner Name	Enter the name of the entity that will be submitting/receiving electronic transactions with BlueCross EDIG.	1 2 3
Trading Partner ID	The Trading Partner ID is assigned by BlueCross EDIG to identify trading partners to our system.	2 3

Form Field Name	Instructions for Field Completion	Req.
Federal Tax ID #	Enter the trading partner's Federal Tax Identification Number.	1
Type of Business	Select the type of primary business the trading partner conducts. If you check "Other," indicate the type of business on the line provided.	1
Line of Business	Check one box per enrollment form indicating if transactions are BlueCross Commercial or TRICARE.	1
Start Date	Indicate, in mm/dd/ccyy format, the date the trading partner plans to begin transaction testing with BlueCross EDIG.	1
End Date	If you are using this form to cancel an account, indicate, in mm/dd/ccyy format, the date the trading partner intends to terminate its trading partner account.	3
Compression	If you wish your files to be downloaded in a compressed format, check **PKZIP** or **UNIX**. If not, check **No Compression**.	1
Protocol	Check the preferred communication method. If ASYNC dial-up is checked, then specify the product. If Other is checked, please specify.	1
Service Address	Enter the trading partner's complete address (including street, city, state and ZIP) that is the physical location for your business.	1 2
Billing Address	If different from the service address, enter the trading partner's billing (or mailing) address (including street, city, state and ZIP).	1 2
Primary Contact Information	The name, e-mail address, telephone number and fax number of the trading partner's primary contact. This is the person BlueCross EDIG will contact if there are questions regarding the enrollment or future questions about the account.	1 2
Technical Contact Information	The name, e-mail address, telephone number and fax number of the trading partner's technical contact. This is the person BlueCross EDIG will contact if there are technical questions or problems.	1 2
After Hours Technical Contact Information	The name, e-mail address, telephone number and fax number of the trading partner's after hours technical contact. This is the person BlueCross EDIG will contact if there are technical questions or problems after normal business hours.	1 2
On-Call Technical Contact Information	The name, e-mail address, telephone number and fax number of the trading partner's on-call technical contact. This is the person BlueCross EDIG will contact if there are technical questions or problems after normal business hours and is unable to contact the After Hours Technical Contact.	1 2
Transaction Volume Estimates	Mark yes (Y) or no (N) for each mode. If you mark yes, indicate the average number of transactions you anticipate submitting each week.	1

Enrollment Testing Procedures

There are fewer problems with trading partner exchange of electronic transactions in the production environment when you conduct testing. EDI Gateway requires trading partners test every transaction for every payer prior to approval for production status. This testing includes security validation, connectivity, compliance (for HIPAA X12N transactions) and front-end payer edits when available in the test environment.

The following must be performed for each different transaction type that a trading partner is approved to submit to EDIG.

Test Plan	EDIG and the trading partner will agree to a predefined set of test data with expected results. The matrix will vary by transaction and trading partner. Also, we will develop a plan for test to production transition that considers volume testing and transaction acceptance ratios.
Connectivity	You will find EDIG supported connectivity protocols in the "Connectivity" topic in this section. This first level of testing is complete when the trading partner has successfully sent to and received from EDIG a test file via one of the EDIG supported connectivity options.
Security	EDIG will validate approved trading partners are submitting transactions allowed per our enrollment applications.
Data Integrity	When HIPAA X12 transactions are transmitted, data integrity is determined by X12 and HIPAA Implementation Guide (IG) compliance edits performed by EDIG's translator. Testing cannot progress until a trading partner's data receives no compliance edit errors. EDIG expects there may be an occasional situation where a trading partner's translator IG compliance interpretation differs from our translator. We will work with our trading partner to resolve such differences on an individual basis. EDIG returns transmission acknowledgement and edit result response transactions from this process. The trading partner should correct transactions reported as errors and resubmit them.
Acknowledgement / Response Transactions	Trading partners must demonstrate the ability to receive acknowledgement and response transactions (see page 36 & 37) from EDIG. EDIG expects trading partners will also implement balancing or reconciliation processes and report transmission discrepancies to us immediately.
Results Analysis	EDIG and the trading partner will review acknowledgement and response transactions for consistency with the predefined expected results.

Payer Testing

Depending on the line of business and transaction, the payer may require additional testing. If so, EDIG Operations will inform the trading partner when test plans are discussed.

Transition from Test to Production Status

When test results have satisfied the test plan, we will change the trading partner's submission status from test to production. At this time, the trading partner can begin to send production transaction data to EDIG.

Privacy

EDIG and our trading partners are committed to protecting the privacy of patient information. When sending sensitive data (i.e., names, patient ID numbers, date of birth, etc.) via the Internet to EDIG Operations for research, please zip and password protect files.

Connectivity

Trading partners may choose to connect with EDI Gateway via dial-up (GP Net) interface, secure high-speed data transfer, SNA and IP access.

Dial-up interfaces available are:
- REDI (Asynchronous Dialup)
- FTP (File Transfer Protocol Dialup)

Secured high speed data transfer methods available are:
- SFTP (Secure FTP utilizing SecureFx)
- VPN (Virtual Private Network)
- NDM (Connect: Direct Network Data Mover)

SNA interface available is:
- LU6.2

IP access:
- TCPIP

The following table lists protocol and transfer methods for each connectivity option:

Connectivity	Protocol	Transfer Method
SFTP	SSH2	SFTP (software negotiates encryption such as DES, 3DES, CAST-128)
VPN	VPN over TCP/IP	FTP
NDM	SNA	NDM Proprietary
LU6.2	SNA	Proprietary over SNA/AGNS
DIAL-UP	REDI	Proprietary transfer via X, Y or Z modem
DIAL-UP	FTP	Proprietary FTP
IP	TCPIP	Proprietary IP connection via AGNS

The following table lists connectivity options available for certain transactions:

Transaction	Available Connectivity Types
X12N 270	Dial-up, SFTP, NDM, VPN, LU6.2, TCPIP
X12N 276	Dial-up, SFTP, NDM, VPN, LU6.2, TCPIP
X12N 278	Dial-up, SFTP, NDM, VPN
X12N 820	Dial-up, SFTP, NDM, VPN
X12N 834	Dial-up, SFTP, NDM, VPN
X12N 835	Dial-up, SFTP, NDM, VPN
X12N 837	Dial-up, SFTP, NDM, VPN

GP Net

Overview

The GPNet communication interface supports asynchronous telecommunications up to 56K bps. It will support numerous asynchronous telecommunication protocols, including Kermit, Xmodem (Check Sum), Ymodem (Batch) and Zmodem. Most off-the-shelf communication software will support one or all of these protocols. You may select any of the protocols listed below. **We recommend Zmodem**, however, based on its speed and reliability. The asynchronous user's modem should be compatible with 56K, V.34 - 28.8 bps, and V.42 - 14.4 bps.

♦ ProComm Plus; Release 2.11 (Windows)

♦ Crosstalk; Release 2.2 (Windows)

♦ QuickLink2; Release 1.4.3 (Windows)

♦ PC Anywhere; Release 2.0 (Windows)

♦ Term; Release 6.1, 6.2, and 6.3

♦ Mlink; Release 6.07

♦ HyperTerminal; Windows '95, '98, and NT

The settings you should verify are:
♦ Terminal emulation - VT100
♦ Parity - NONE
♦ Data Bits – 8
♦ Stop Bits - 1

For Zmodem, ensure that both sender and receiver crash recovery is "OFF" or set to "OVERWRITE." When downloading a file, this setting will determine whether Zmodem overwrites an existing file of the same name. Since the response file name will be repeated, we recommend that the downloaded files be renamed or moved to another directory immediately to avoid losing or overwriting a file.

In addition, we encourage the use of PKZIP compatible compression software. GPNet defaults to send uncompressed files. Therefore, if you wish to receive your files in a compressed format, please indicate this on your enrollment form or contact the Technology Support Center.

The GPNet asynchronous transmission is a dial-up connection. Depending on your operating system, your windows may display differently than those noted in the following figures.

Dial-up REDI

Initial Set Up Using Asynchronous Dial-up

To submit files using the GPNet asynchronous dial-up, first you must make a connection and login.

1. Click on **Start**, then **Programs**, then **Accessories**, and then click on the **HyperTerminal** option. This will open the Connection Description Window. Type a name and choose an icon for the connection. Then click on **OK**. (Figure 1)

- *If you are unable to locate HyperTerminal under Accessories, look in the Communications option. If unable to find that option, then look up "Installing Windows Components" in Windows Help.*

Figure 1 – Connection Description Box

2. The Phone Number message box (Figure 2) is where you enter the GPNet phone number, and verify your country code, area code and modem. Complete the following steps:

   a) For **Country code**, select **United States of America (1)** if it does not initially display in the field.

   b) In the **Area code** field – Enter **803**.

   c) In the **Phone Number** field – Enter **788-6147 for production or 788-3362 for test**.

   d) In the **Connect using** field you should already see a description of your modem. Verify that it is correct or use the dropdown arrow to select the correct modem.

   e) Click **OK**.

Figure 2 – Phone Number Message Box

Server Connection Using Asynchronous Dial-up

1. The connect message boxes (Figures 3 and 4) let you dial GPNet and see the status of your call. Complete these steps to make your connection:
   a) If the Phone Number for GPNet and Your Location are correct (Figure 3), click **Dial.**

- If you need to correct the telephone number, modem setting or connection icon, click the **Modify** button. Click the **Dialing Properties** button only if you need to correct information about your telephone settings.

- *If you have to dial 9 for an outside line, make sure a 9 is displayed in front of the phone number. If not, go to **Modify** and make appropriate changes.*

2. Click on **Dial Now**. The Connect Message box will change to display **Status** information. After dialing completes, you are connected to the GPNet Gateway. (Figure 4)
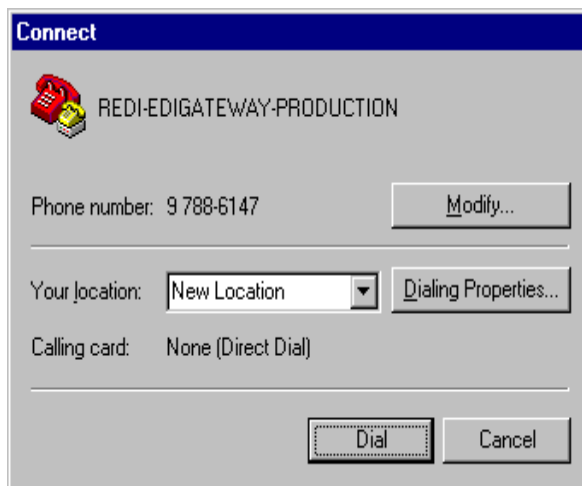
Figure 3 – Connection Message Box

Figure 4 – Connection Message Box

Log In and User Validation

Upon connecting to the GPNet system via your communications program, the system will display a banner and prompt for the user ID (Figure 5).
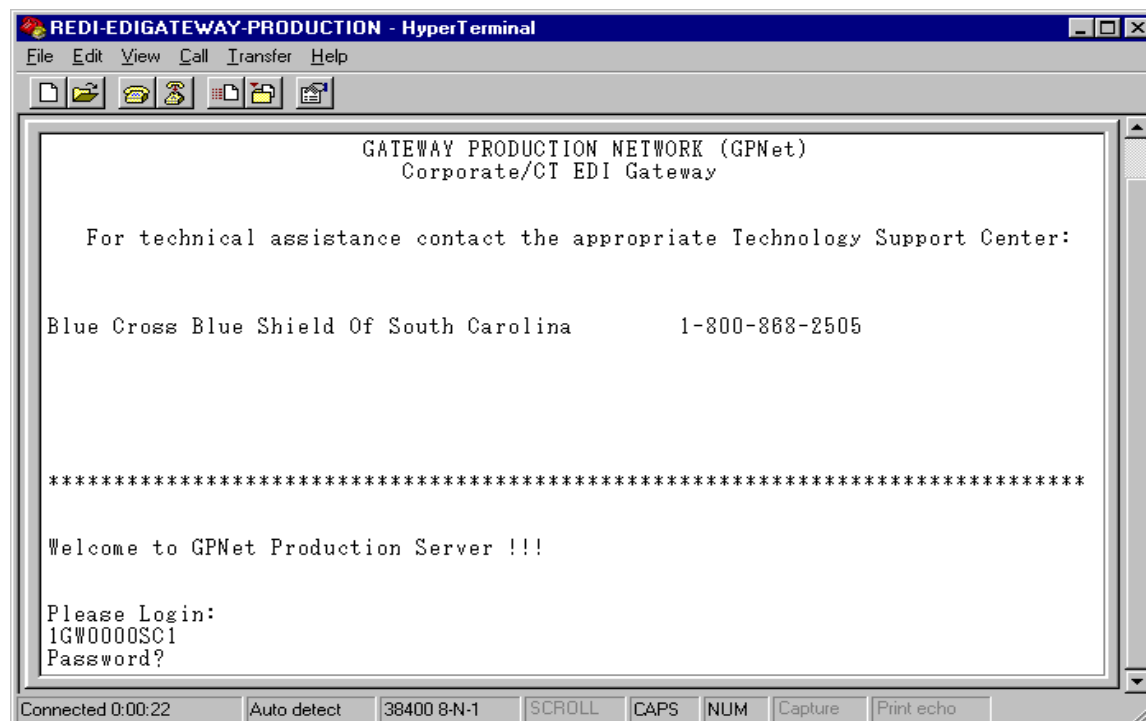
Figure 5 – GPNet Welcome/Login Screen

You must enter the ID and password in **capital letters**. To login:

1. Type your User ID and press ENTER. **Note:** To log into the Test Server, use your user ID with the 'Q' on the end. To log into the Production Server, use your user ID with the number on the end.

2. Type your password. The password will not display on the screen as you type it. When you have finished typing, press ENTER.

3. The system will allow three invalid login attempts before it terminates the session. Also, the system will automatically log you off after approximately two minutes of inactivity.

To change your password, please contact the BlueCross Technology Support Center at 1-800-868-2505 or 1-803-736-5980.

Messages

After the User ID and password are validated, the Message screen displays (Figure 6).
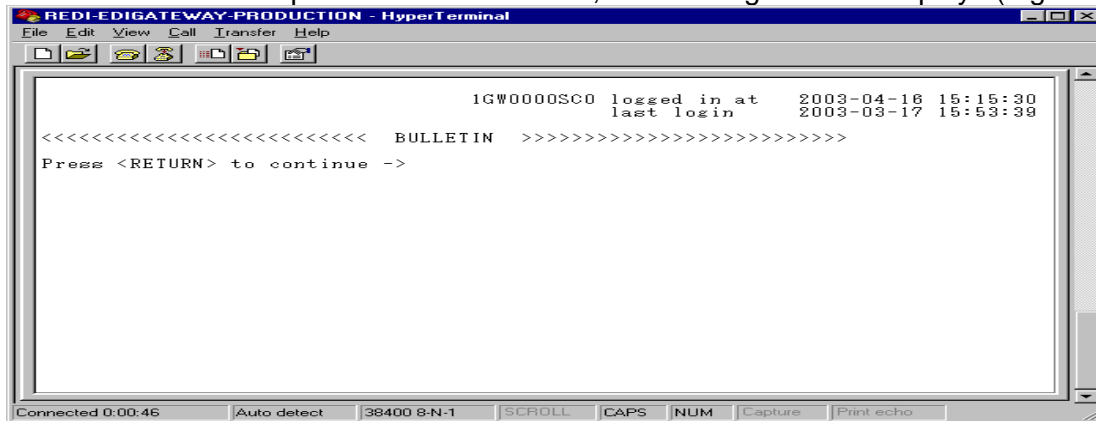
Figure 6 – GPNet Message Screen

This screen features two distinct parts:

♦ User Login information – displays information about current and previous login activity.

♦ The system-wide banner – displays important information for all trading partners.

After reading any banner messages, press **ENTER** to continue to the Main Menu.

Main Menu

From the Main Menu (Figure 7), you can either choose the number or the first letter of the action you want. Press **ENTER**.
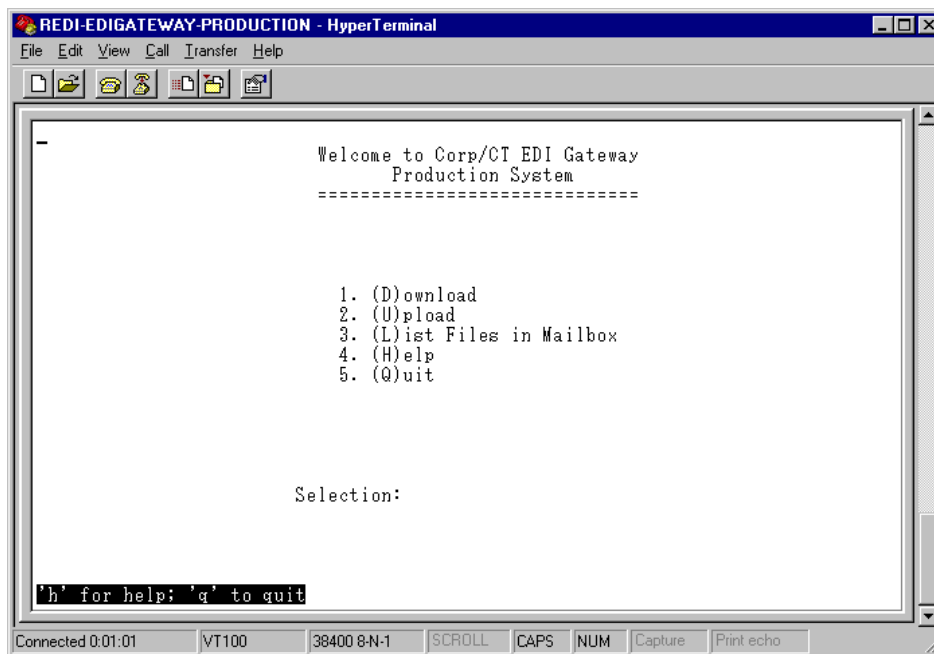
Figure 7 – GPNet Main Menu

Upload a File

To upload a file to GPNet:

1. Type **2** (or **U**) from the Main Menu and then press **ENTER**.

2. You will be prompted to select the file transfer protocol (Figure 8). **Do not press ENTER after making your selection.** Type the letter corresponding to your choice of modem protocol. (If you select **Q**, you will return to the Main Menu.)

```
>>>> UPLOAD A FILE <<<<

**** Select Protocol:
                  K for Kermit
                  X for XMODEM
                  Y for YMODEM (BATCH)
                  Z for ZMODEM

               or Q to QUIT


█
```

Figure 8 – Upload Protocol Selection Screen

3. Using your communication software procedures, send the file you wish to upload.

4. If the file transfer is successful, "Transfer COMPLETED SUCCESSFULLY" will display on the screen (Figure 9). If the file transfer fails, the message, "Transfer FAILED," will display.

```
**** Please place your pc in ZMODEM mode to send the file.


**B0000400272214
**B0000400272214
**B0000400272214
**B0000400272214
**B0000400272214

**** Transfer COMPLETED SUCCESSFULLY ****
Press <Return> to continue
```

Figure 9 – Successful Transfer Message

5. Press **ENTER** to return to the Main Menu.

6. Upon successful transmission of a file, you may exit the system or wait for a response file.

   a) To exit the system, press **5** (or **Q**) from the Main Menu and then press **ENTER**. You can dial in after a few minutes later to download the TA1 and IG edit results.

   b) To stay on the system and check for a response file, press **3** (or **L**) to go to the Mailbox and await the response file load. The time between a file upload and the response file availability will vary based on the file size and user volume. Although most responses are available within one hour, please allow 24 hours before contacting the Technology Support Center.

   When the response file is available (listed in your Mailbox), return to the Main Menu and proceed to the Download option.

Download a Response

To download a response file:

1. Type ☐1☐ (or ☐D☐) from the Main Menu and press ☐ENTER☐.

2. You will be prompted to choose a modem protocol (Figure 10).

```
>>>> DOWNLOAD A FILE <<<<

**** Select Protocol:
                    K for Kermit
                    X for XMODEM
                    Y for YMODEM (BATCH)
                    Z for ZMODEM

            or Q to QUIT
```

Figure 10 – Download Protocol Selection Screen

a) If you select **Z** (Zmodem), **K** (Kermit) or **Y** (Ymodem), the system will ask if you wish to download all files in the mailbox. If you choose "Yes" (press ☐Y☐), all available files will begin downloading. If you do not want to download all of the files, choose "No" (press ☐N☐) and the system will display the list of available files (as shown in step 3).

b) If you select **X** (the Xmodem protocol), the file list will display immediately.

3. From the list of available files (Figure 11), enter the number associated with the desired file to begin the download and press ☐ENTER☐. (See the *List Files In Mailbox* section for information on deciphering the files listed in your mailbox.)


```
REDI-EDIGATEWAY-PRODUCTION - HyperTerminal
File  Edit  View  Call  Transfer  Help

Your mailbox contains the following files
 #  Filename                    Type  Size     Date/Time            Ftype
========================================================================
  1. RPT00056.RPT.               f    2356     Dec  31  1969        Seq
  2. RPT00059.RPT.               f    2356     Dec  31  1969        Seq
  3. X1200054.X12.T0310034677000 f    294      Feb  04  08:57       Seq
  4. X1200055.X12.T0310034677000 f    278      Feb  04  08:57       Seq
  5. X1200057.X12.T0317034677000 f    294      Feb  04  08:50       Seq
  6. X1200058.X12.T0317034677000 f    278      Feb  04  08:50       Seq

**** End of file list, press any key to continue


Connected 0:01:25    VT100    38400 8-N-1    SCROLL  CAPS  NUM  Capture  Print echo
```
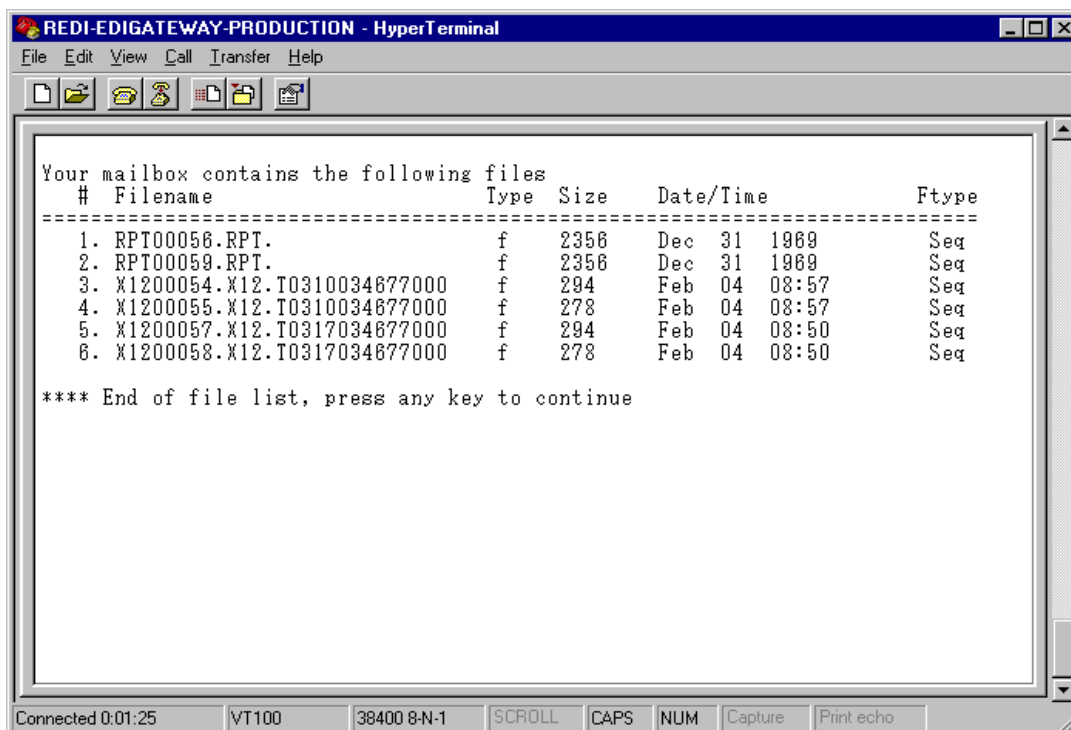
Figure 11 – Mailbox File List

If the file transfer is complete and successful, the "Transfer COMPLETED SUCCESSFULLY" message will appear on the screen and the file will be deleted from the mailbox. If the file transfer fails, the "Transfer FAILED " message will display. Files that have not been downloaded successfully will remain in the mailbox for 14 days before being purged.

List Files In Mailbox for X12 Transactions

To check on files that you may have available to download from GPNet:

1. Choose List Files in Mailbox by pressing 3 (or L) from the Main Menu and press ENTER.

2. The system will prompt you to enter the name of the file you wish to see. You can type the full or a partial file name combined with an optional wildcard (*). All files matching the search pattern will be displayed. You can also leave the file name field blank and just press ENTER to see a list of all the files in your mailbox. (Note: This same list also displays when you select the Xmodem Protocol from the Download option.)

3. If no matching files are found, the system will display the following message: "No files match your specified search pattern. Press RETURN to input new search pattern or q to quit." If there are more than 15 files in the list, the system will pause and scroll the listing.

All files in your mailbox are presented in a similar format: the 8-byte download file name with a 3-byte extension, followed by a file description. The following table shows examples and explanations of files that you can download:

*	Type			Sequence Number					.	ZIP or Type			.	File Description															
														PTU	Date				Original ISA Control Number									Trans No.		
Pos.	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.	27.	28.	29.	30.
Sample Set 1**	X	1	2	0	0	0	0	1	.	X	1	2	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
	X	1	2	0	0	0	0	2	.	X	1	2	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
	X	1	2	0	0	0	0	3	.	X	1	2	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
	R	S	P	0	0	0	0	4	.	R	S	P	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
	R	P	T	0	0	0	0	5	.	R	P	T	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
2	I	N	V	0	0	0	0	1	.	I	N	V	.	U	0	1	2	5												
3	X	1	2	0	0	0	0	1	.	X	1	2	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
	X	1	2	0	0	0	0	2	.	X	1	2	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
	X	1	2	0	0	0	0	3	.	X	1	2	.	P	0	1	2	5	I	S	A	C	T	R	L	0	1	0	0	0
4	M	S	G	0	0	0	0	1	.	M	S	G	.	U																
5	X	1	2	0	0	0	0	1	.	Z	I	P	.	B	C	B	S	S	C											

The following information describes the file segments.

Segment	Position	Description
Type	1-3	File types are identified using the follow 3-byte segments— RSP EDIG proprietary responses RPT EDIG proprietary reports INV invalid file response MSG informational messages X12 X12 responses (i.e. TA1, 997, 999)
Sequence Number	4-8	EDIG-generated sequential number for each file sent to a mailbox.
.	9	Period

Segment	Position	Description
ZIP or Type	10-12	Three-byte extension— ZIP Zipped files of any type. "ZIP" will replace the 3-byte extension in the file name based on the ZIP flag in our control file. RSP EDIG responses RPT EDIG reports INV Invalid file response MSG Informational messages X12 All X12 responses (i.e. TA1, 997, 999)
.	13	Period
File Description	14-32	Identifies file's content—
	14	PTU Production (P), Test (T) or Unknown Indicator (U) Payer Name for Remittance files (HIPAA X12 835's)
	15-18	Date Date the input file was received; MMDD format.
	19-27	Original ISA Control Number The ISA Control Number of the first interchange group in the file.
	28-30	Not Used

Sample Set 1: Examples of 837 response, report and acknowledgement files. In this example, the first production file is an 837 sent January 25, 2002 with one ISA/IEA. The file contained 235 claims and the ISA control number is ISACTRL01. Example 1 is the file name containing ASC X12 TA1, example 2 is the file name containing ASC X12 997 and example 3 is the file name containing ASC X12 999 returned to the trading partner.

Sample Set 2: In this example, the file received was an invalid file (a possible read error or unzip error). The file would contain a text message that describes the error, shown in the Response Example below.

Sample Set 3: If the file received has HIPAA X12 or IG compliance errors, the three files will be returned to the trading partner containing the ASC X12 TA1, 997 and 999 respectively.

Sample Set 4: This is a file name when the file's content is an informational message.

Sample Set 5: If the file received is a HIPAA X12 835 transaction, the file description field will have the payer's name (Example 'BCBSSC' for BlueCross remit files).

Dial-up FTP

The GP Net communication interface also allows an FTP connection. This is a direct dial-up connection. All files must be transmitted in binary format. ASCII will not be processed. The default setting is ASCII so you must issue the "bin" command to change the format to binary. You can confirm the change by issuing the "status" command and verifying the change was accepted. Depending on your operating system, your windows may display differently than those noted in the following figures.

Logging onto GPNet Using FTP

To submit files using the GPNet FTP, first you must make a connection and login.

1. Create a Windows Dial-Up Networking session. Open a **My Computer** window and then open (double-click) the **Dial-Up Networking** folder (Figure 12).
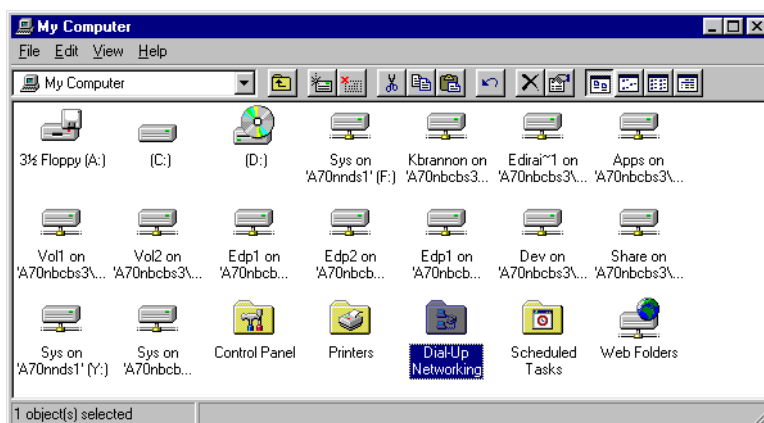
Figure 12 – My Computer Window

2. Open (double-click) **Make New Connection** (Figure 13).
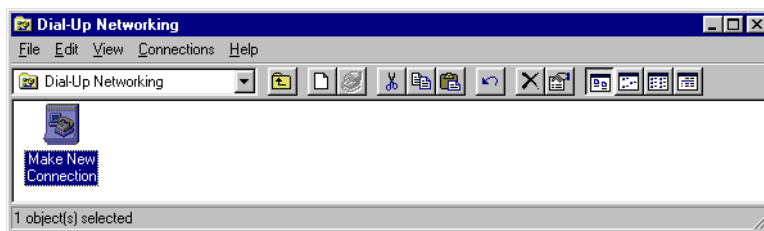
Figure 13 – Dial-Up Networking Window

3. The Make New Connection wizard will open (Figure 14). In the first field type **GPNet**. Confirm that the appropriate modem for your system is chosen in the second field and then click **Next**.
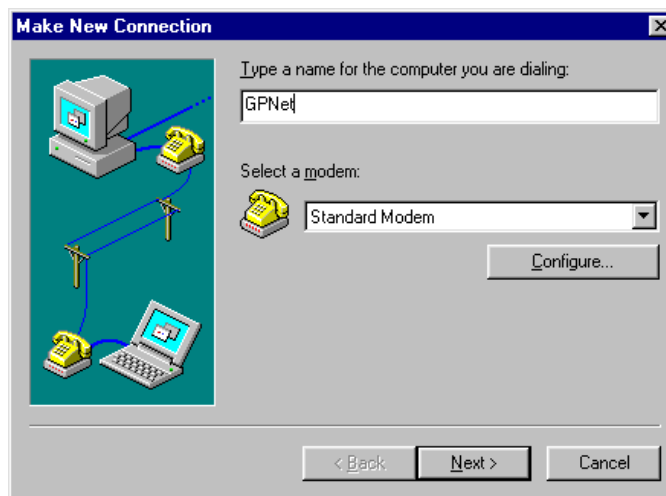
Figure 14 – Make New Connection Wizard 1

4. On the next window (Figure 15), type **803 in the Area Code field and 788-6705 for production or 803 788 –3724 for test** in the Telephone Number field. Click **Next**.
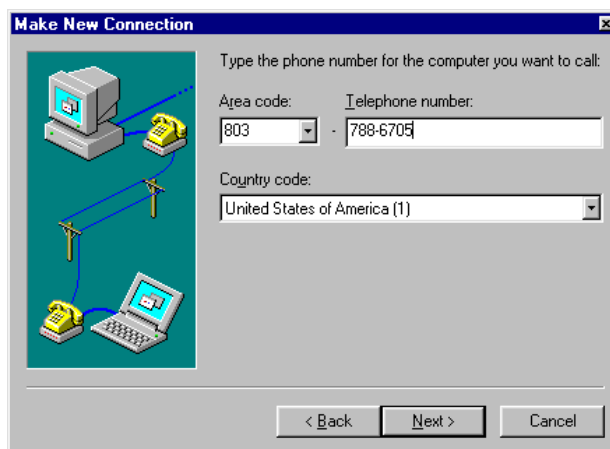
Figure 15 – Make New Connection Wizard 2

5. The final wizard window will display (Figure 16). Click **Finish** to save and create the shortcut for this new connection.
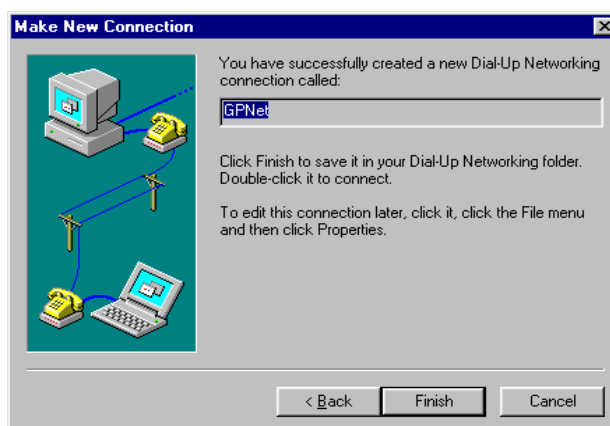
Figure 16 – Make New Connection Wizard 3

6. Go back to your Dial-Up Networking folder (Figure 17) and open (double-click) the new GPNet icon.
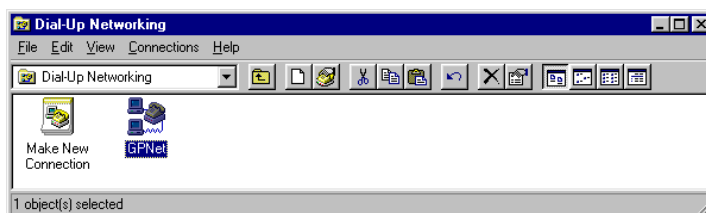
Figure 17 – Dial-Up Networking Folder

7. The Connect To window will open (Figure 18). Type in the GPNet router login and password (you will receive this information during connectivity testing) Note: The user name and password are case sensitive. Click **Connect**.

Figure 18 – Connect to Window

8. Your modem will dial and the screen shown in Figure 19 will display when the connection is established. Click **Close**.

9. Use MS-DOS to make a connection.

   a) Open a DOS prompt.

   b) Type **ftp** at the prompt and press ENTER.

   c) At the ftp> prompt, type **open 192.168.103.135 2021 for production or 192.168.103.137 2021 for test** and press ENTER. You will see the connection information shown in Figure 20.
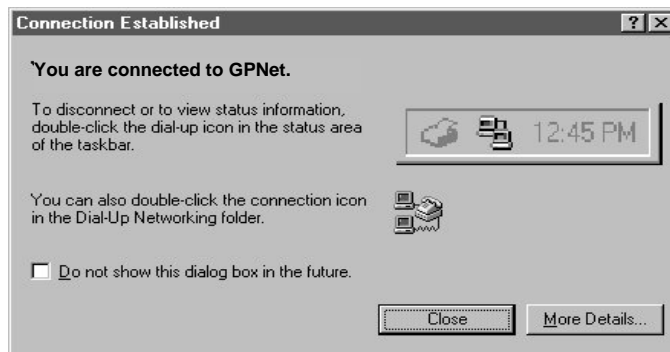
Figure 19 – Connection **Established Window**
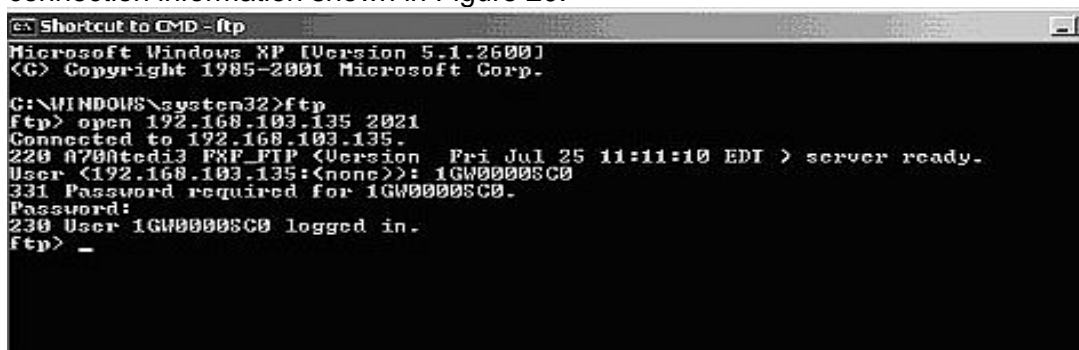
Figure 20 – MS-DOS Prompt Window with FTP Connection

   d) Type your user name at the **User prompt** and press ENTER.

   e) Type your password and press ENTER.

Uploading Files Using FTP

1. To upload a file after connecting:

   a) At the ftp> prompt, type **bin** and press ENTER.
      ftp> bin
      200 Type set to I.

   b) At the ftp> prompt, type **cd inbound** and press ENTER.
      ftp> cd inbound
      250 CWD command successful.

   c) Type **ls** and press ENTER.
      ftp> ls
      200 PORT command successful.
      150 opening data connection for ..

   d) Type **lcd d:/** (and the path name to the file on your local directory) press ENTER.
      Note: The file name you wish to retrieve must exactly match the file name on your local directory. Your local directory drive may be different from the example above.
      ftp> lcd d://(the path name to the file on your local directory)

   e) Type **put**, your file name, and **CUSTOMER_UPLD!FTP** and then press ENTER.
      ftp> put [YOURFILENAME] CUSTOMER_UPLD!FTP

NOTE: Your file name can be no more than 30 characters in length

f) After the file has been successfully uploaded, you will receive a "Transmission Successful" message.

g) If you would like to retrieve your immediate response, type cd .. and go to step B of the Download Files Using FTP instructions.

2. To exit the FTP process, type **bye** and press **ENTER**.

3. To exit MS-DOS, type **exit** at the prompt and press **ENTER**.

4. To end your modem connection, find the blinking modem signal on your Windows Taskbar (at the bottom right of the screen). Click this symbol and the Connect Status box will open (Figure 21). Click on **Disconnect**.
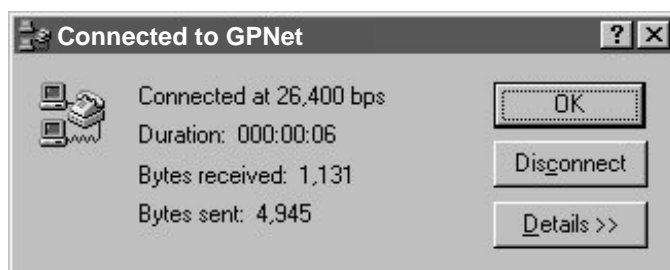
Figure 21 – Connection Status Window

Downloading Files Using FTP

1. To download a file after connecting to the FTP/FXF, begin by changing directories to the outbound mailbox and list the files available for download.

a) At the ftp> prompt type **bin** and press **ENTER**.
   ftp> bin
   200 Type set to I.

b) Type **cd outbound** and press **ENTER**.
   ftp> cd outbound
   250 CWD Command Successful

c) Type **ls** and press **ENTER**. You will see the file list information:
   200 PORT command successful.
   150 Opening data connection for ..
   X1200001.ZIP.ISACTRL0001
   X1200002.ZIP.ISACTRL0001
   226 Transfer complete.
   ftp>

d) After determining which file you want to download, enter in the download command (**get** and the file name) at the ftp> prompt.
   ftp> get X1200001.ZIP.ISACTRL0001

   Note: The file name you wish to retrieve must exactly match the file name in the outbound directory (wild cards "*" will be accepted only if "glob" is on).

e) When the download is complete, you will get a "Transfer Complete" message.

f) To delete files from the outbound mailbox issue a 'del' command at the ftp> prompt
   ftp> del X1200001.ZIP.ISACTRL0001

Note: If you do not delete the files after successfully downloading them, they will remain in the outbound directory for 14 days, at which time they will be automatically purged. If you have multiple files to retrieve, you may use the "mget *" command, which will prompt you to confirm each file prior to the initiation of each file transfer – unless you have "prompt" turned off.

Secure File Transfer Protocol (SFTP)

Trading partners choosing this option will connect through a firewall to a Windows NT server on the BlueCross network. You can access this server via AT&T's AGNS network, Blues Net® or the Internet. Additional authentication is done with use of a unique login ID and password. When this authentication is complete, the trading partner will be placed in the inbound directory where they will upload files for EDI Gateway processes. Trading partners should query the outbound directories to retrieve acknowledgement and response files. When you choose this connectivity option, EDI Gateway will request additional information from the trading partner such as source IP address and if you would like to test your connectivity setup.

Please be advised that all requests received will be completed within 7 – 14 business days.

Our SFTP server accepts SFTP client connections using the SSH2 secure protocol. The client product our Network Operations department recommends using is SecureFX from VanDyke Software, although any SFTP/SSH2 client that supports public key authentication (SSH2 public key, DSA, 1024-bit) should work. SecureFX allows you to automatically upload your public key on the first login. If you are using SecureFX, please let us know and we will supply you with a password for uploading your key).

Files submitted through the SFTP, VPN and NDM communication methods can either be segmented (one segment per line) with a valid non-special character delimiter or a 1000 byte wrapped EDI format with each ISA starting in a new line.

Virtual Private Network (VPN)

Trading partners choosing this option will connect through a firewall to a Windows NT server on the BlueCross network. You can access this server via AT&T's AGNS network, Blues Net or the Internet. A private key will be established used to create a VPN tunnel between the trading partner's and BlueCross' servers. Additional authentication is done with use of a unique login ID and password. When this authentication is complete, the trading partner can use ftp to submit or retrieve files to/from EDI Gateway processes. Trading partners should query outbound directories to retrieve acknowledgement and response files. When you choose this connectivity option, EDI Gateway will request additional information from the trading partner such as source IP address and a communications technical contact.

Files submitted through the SFTP, VPN and NDM communication methods can either be segmented (one segment per line) with a valid non-special character delimiter or a 1000 byte wrapped EDI format with each ISA starting in a new line.

Connect Direct: NDM

Trading partners choosing this option will connect through AT&T's AGNS network to BlueCross' eServer using Sterling Software's Connect Direct software. The trading partner must acquire Connect Direct licensing directly from Sterling Software. Authentication is done with use of a unique login ID and password. When this authentication is complete, the trading partner's processes can copy files to a BlueCross eServer dataset. Acknowledgement and response files will be returned from BlueCross' eServer to the trading partner.

EDI files submitted through the SFTP, VPN and NDM communication methods can either be segmented (one segment per line) with a valid non-special character delimiter or a 1000 byte wrapped EDI format with each ISA starting in a new line.

The following describes claims dataset naming conventions, and attributes for X12 transactions.

X12 Production Dataset Names should be BC.HEDI.NDM.INP.**TP-ID**, and a generation data group. **TP-ID** is an 8 character EDIG assigned value associated with the EDIG assigned trading partner id.

BlueCross Commercial example   trading partner id: **CGW0000SC0**; TP-ID: **C0000SC0**
TRICARE example   trading partner id: **7GW0000SC0**; TP-ID: **S0000SC0**

X12 Dataset Attributes
    DISP: (NEW, CATLG, DELETE)
    UNIT: SYSDG
    SPACE: (CYL, (75,10), RLSE)
    DCB: (RECFM=FB, LRECL=1000, BLKSIZE=27000)

LU6.2

The trading partners choosing this method will connect through AT&T's AGNS network to BlueCross' eServer. It is a real time PU (Physical Unit) to PU connection over SNA/LU6.2. Trading partners must develop an application that acquires a CICS session with BlueCross' eServer to send and receive HIPAA X12 transaction data streams. These submissions must be enveloped as single a transaction, which is 1 ST/SE per GS/GE per ISA/IEA. EDIG's applications validate the trading partners id in ISA02 and GS02, and processes transactions for approved trading partners.

TCPIP

The trading partners choosing this method will connect through AT&T's AGNS network to BlueCross' eServer. The trading partner will deploy an application (for their server) that will initiate a transaction via socket x to socket y on the BlueCross' server. This application must acquire the socket connection, and send a HIPAA compliant X12 datastream preceded by a header. The X12 transactions must be enveloped as single transactions, i.e., one ST/SE per GS/GE per ISA/IEA. The length of the X12 transaction datastream cannot exceed 32K.

X12 Transactions

The EDI Gateway processes the following HIPAA transactions. ASC X12N transactions are version 4010A1.

Transaction	Description
270	Health Care Eligibility and Benefit Inquiry
271	Health Care Eligibility and Benefit Response
276	Health Care Claim Status Request
277	Health Care Claim Status Response
278	Health Care Review information
820	Health Plan Premium Payment
834	Benefit Enrollment and Maintenance
835	Health Care Payment and Advice
837I	Institutional Health Care Claim
837D	Dental Health Care Claims
837P	Professional Health Care Claims

EDIG Inbound Response Matrix

The following table lists acknowledgement and response transactions returned to the trading partner when EDI Gateway receives HIPAA X12 transactions.

Trans-action	Interchange Acknowledge-ment	Functional Group Acknowledge-ment	Transaction Set Acknowledge-ment	Implementation Guide Edit Results	Payer SIG Edit Results	Payer Appl. Edit Results
270*	TA1†	If functional group errors, 997† is returned; if not, a functional group acknow-ledgement is not returned	If transaction set errors, 997† is returned; if not, a transaction set acknowledge-ment is not returned	If errors, 997† (X12 syntax edit results) and 999† (HIPAA IG syntax edit results); if not, edit results are not returned	271	271
270**	TA1†	997†	997†	997†, 999†	271	271
276*	TA1†	If functional group errors, 997† is returned; if not, a functional group acknow-ledgement is not returned	If transaction set errors, 997† is returned; if not, a transaction set acknowledge-ment is not returned	If errors, 997† (X12 syntax edit results) and 999† (HIPAA IG syn-tax edit results); if not, edit results are not returned	277	277
276**	TA1†	997†	997†	997†, 999†	277	277
278*	TA1†	If functional group errors, 997† is returned; if not, a functional group acknow-ledgement is not returned	If transaction set errors, 997† is returned; if not, a transaction set acknowledge-ment is not returned	If errors, 997† (X12 syntax edit results) and 999† (HIPAA IG syn-tax edit results); if not, edit results are not returned	278	278
278**	TA1†	997†	997†	997†, 999†	278	278
820	TA1†	997†	997†	997†, 999†	n/a	n/a
834	TA1†	997†	997†	997†, 999†	n/a	n/a
837*	TA1†	If functional group errors, 997† is returned; if not, a functional group acknow-ledgement is not returned	If transaction set errors, 997† is returned; if not, a transaction set acknowledge-ment is not returned	If errors, 997† (X12 syntax edit results) and 999† (HIPAA IG syn-tax edit results); if not, edit results are not returned	EDIG propri-etary claim response file	EDIG propri-etary claim response file
837**	TA1†	997†	997†	997†, 999†	EDIG propri-etary claim response file and reports	EDIG propri-etary claim response file and reports

* Batch of one: The most simple, singular request is contained in the ST/SE for a transaction.

** Batch of many: All other record groupings.

† HIPAA Implementation Guides are available that include format specifications for each transaction. You can get these guides from the Washington Publishing Company (WPC) Web site: www.wpc-edi.com/hipaa.

EDIG Specifications for Enveloping X12 Transactions

X12 Inbound Transactions

The following table lists envelope instructions for inbound (to EDI Gateway) HIPAA X12 transactions.

Segment Identifier	Data Element	Description
ISA01	Authorization Info Qualifier	03
ISA02	Authorization Information	EDIG assigned Trading Partner ID
ISA03	Security Information Qualifier	00
ISA04	Security Information	None
ISA05	Interchange ID Qualifier	01, 14, 20, 22, 27, 28, 29, 30, 33, ZZ (selected by trading partner)
ISA06	Interchange Sender ID	Assigned by Trading partner
ISA07	Interchange ID Qualifier	30 (qualifier indicating U.S. Federal Tax Identification Number)
ISA08	Interchange Receiver ID	Destination Entity U.S. Federal Tax Identification Number *
ISA09	Interchange Date	Populated by Trading partner
ISA10	Interchange Time	Populated by Trading partner
ISA11	Interchange Controls Standards ID	U
ISA12	Interchange Control Version Number	00401
ISA13	Interchange Control Number	Assigned by the Trading partner (must be unique for 12 months)
ISA14	Acknowledgment Requested	Assigned by the Trading partner
ISA15	Usage Indicator	P, T (Production or Test indicator)
ISA16	Component Element Separator	Assigned by the Trading partner
GS01	Functional Identifier Code	Populated by Trading partner
GS02	Application Sender's Code	EDIG assigned Trading Partner ID
GS03	Application Receiver's Code	Destination Entity U.S. Federal Tax Identification Number. Must be same as ISA08. *
GS04	Date	Populated by Trading partner
GS05	Time	Populated by Trading partner
GS06	Group Control Number	Assigned by the Trading partner (value must remain unique for one year)
GS07	Responsible Agency Code	X
GS08	Version/Release/Industry Identifier Code	Populated by Trading partner

* BlueCross and Subsidiaries:

Entity	Federal TIN	Entity	Federal TIN
BlueCross BlueShield of South Carolina	570287419	Instil Healthcare Insurance Company	201393447
BlueChoice HealthPlan	570768835	PGBA, LLC (TRICARE)	571132733
Carolina Benefit Administrators	571001631	Planned Administrators, Incorporated	570718839
Companion Life Insurance Company	570523959	Thomas H. Cooper & Company	571032566
Employee Benefit Administrators	561939146	Health Net[®]	061084283
Humana Veteran Healthcare Services	208418853		

Note: Additional explanations are available in the National Electronic Data Interchange Transaction Set Implementation Guides.

X12 Outbound Transactions

The following table lists envelope contents for outbound (from EDI Gateway) HIPAA X12 transactions.

Segment Identifier	Data Element	Description
ISA01	Authorization Info Qualifier	00
ISA02	Authorization Information	Blanks
ISA03	Security Information Qualifier	00
ISA04	Security Information	Blanks
ISA05	Interchange ID Qualifier	30 (qualifier indicating U.S. Federal Tax Identification Number)
ISA06	Interchange Sender ID	Sending entity's U.S. Federal Tax Identification Number *
ISA07	Interchange ID Qualifier	If 271, 277 or 278 transaction, ISA07 will be the same value of the associated inbound 270, 276 or 278 ISA05. If 997, 999, TA1 or EDIG claim response, ISA07 will be the same value of the associated inbound transaction's ISA05. Otherwise value is 'ZZ'.
ISA08	Interchange Receiver ID	If 271, 277 or 278 transaction, ISA08 will be the same value of the associated inbound 270, 276 or 278 ISA06. If 997, 999, TA1 or EDIG claim response, ISA08 will be the same value of the associated inbound transaction's ISA06. If above ISA07 is 'ZZ', value is EDIG assigned Trading Partner ID.
ISA09	Interchange Date	Populated by EDIG
ISA10	Interchange Time	Populated by EDIG
ISA11	Interchange Controls Standards ID	U
ISA12	Interchange Control Version Number	00401
ISA13	Interchange Control Number	Assigned by EDIG
ISA14	Acknowledgment Requested	1
ISA15	Usage Indicator	P, T (Production or Test indicator)
ISA16	Component Element Separator	Populated by EDIG
GS01	Functional Identifier Code	Populated by EDIG
GS02	Application Sender's Code	Sending entity's U.S. Federal Tax Identification Number or another mutually agreed to sender identifying code *
GS03	Application Receiver's Code	If 271, 277 or 278 transaction, GS03 will be the same value of the associated inbound 270, 276 or 278 GS02. If 997, 999, TA1 or EDIG claim response, GS03 will be the same value of the associated inbound transaction's GS02. Otherwise, value is EDIG assigned Trading Partner ID.
GS04	Date	Populated by EDIG
GS05	Time	Populated by EDIG
GS06	Group Control Number	Assigned by EDIG
GS07	Responsible Agency Code	X
GS08	Version/Release/Industry Identifier Code	Populated by EDIG

* BlueCross and Subsidiaries:

Entity	Federal TIN
BlueCross (includes FEP, State)	570287419
BlueChoice HealthPlan	570768835
PGBA, LLC (TRICARE)	571132733

Note: Additional explanations are available in the National Electronic Data Interchange Transaction Set Implementation Guides.

EDIG Proprietary Claim Responses

When you transmit electronic claims to the BlueCross EDI Gateway, the gateway generates responses that advise you of the status of your submission. All trading partners will receive the response file. It consists of one record for each claim processed by EDIG. Also, some trading partners will receive two reports: the Claims Submission Summary Report and the Error Claim Summary Report. The Claims Submission Summary Report is a listing of what BlueCross EDI Gateway actually received from you and it indicates whether those claims passed the first set of front-end edits. The Error Claims Summary Report identifies errors on rejected claims so that you can correct and resubmit your claims as soon as possible.

Claim Response Layout – Professional

Data Element	Picture	Source	Description
MCN	PIC X(100)		
MCN-Data Redefines MCN			
PROCESSOR-ID	PIC X(09)	ISA08	Entity to whom EDIG is routing the claim.
X12 TRANSACTION-ID	PIC X(04)	ST01	Transaction set control number, always '837'
X12 VERSION-NUMBER	PIC X(12)	GS08	Version release Identification code
SUBMITTER-ID	PIC X(10)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
BILLING-PROVIDER-ID	PIC X(12)	Loop 2010AA-NM109	First 12 characters of billing provider's EIN or SSN
SUBSCRIBER-ID	PIC X(17)	Loop 2010BA-NM109	First 17 characters of subscriber's member identification number
PATIENT-CONTROL-NUMBER	PIC X(20)	Loop 2300-CLM01	Patient account number
ENTRY-DATE	PIC X(08)		Date data retrieved from trading partner's mailbox
ENTRY-TIME	PIC X(08)		Time data retrieved from trading partner's mailbox
End of MCN-Data			
ACCEPT/REJECT-INDICATOR	PIC X(01)		Generated by EDIG to indicate claim forwarded to processor (A) or rejected back to trading partner with errors (R)
TEST/PROD-INDICATOR	PIC X(01)	ISA15	Code to indicate production (P) or test (T) claim
GROUP-CONTROL-NUMBER	PIC X(09)	GS06	Group control number assigned by the trading partner
PROCESSOR-ASSIGNED-CLAIM-NUMBER	PIC X(20)		Available when provided by processor
FILLER-RESERVED	PIC X(20)		
Reference/Trace-Number-Data	**Occurs 4 Times**		
REFERENCE/TRACE-NBR-INDICATOR	PIC X(01)		
EDIG-ASSIGNED-NBR	VALUE E		Assigned by EDIG
SUBMITTER-ASSIGNED-NBR	VALUE S		Assigned by trading partner
RECEIVER-ASSIGNED-NBR	VALUE R		Assigned by third party process
REFERENCE/TRACE NUMBER	PIC X(30)	Loop 2300-REF02	Value-added network trace number assigned by sender (claim number)
Submitter-Data-Area Note: Submitter individual is used if loop 1000A-NM102 = 1 (person), submitter organization is used if loop 1000A-NM102 = 2 (non-person entity)			

Data Element	Picture	Source	Description
Submitter-Individual			
SUBMITTER-ID	PIC X(25)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
SUBMITTER-LAST-NAME	PIC X(20)	Loop 1000A-NM103	Trading partner last name
SUBMITTER-FIRST-NAME	PIC X(14)	Loop 1000A-NM104	Trading partner first name
SUBMITTER-MIDDLE-INITIAL	PIC X(01)	Loop 1000A-NM105	Trading partner middle initial
Submitter-Organization Redefines Submitter-Individual			
SUBMITTER-ID	PIC X(25)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
SUBMITTER-ORGANIZATION-NAME	PIC X(35)	Loop 1000A-NM103	Trading partner organization name
Payer-Data-Area			
PAYER-ID-CODE	PIC X(25)	Loop 2010BB-NM109	Payer identifier
PAYER-NAME	PIC X(35)	Loop 2010BB-NM103	Payer name
Receiver-Data-Area			
RECEIVER-ID	PIC X(25)	Loop 1000B-NM109	Receiver primary identifier
RECEIVER-NAME	PIC X(35)	Loop 1000B-NM103	Receiver name
Billing-Provider-Data-Area Note: Billing Provider Individual is used if loop 2010AA-NM102 = 1 (person), Billing Provider Organization is used if loop 2010AA-NM102 = 2 (non-person entity)			
Billing-Provider-Individual			
BILLING-PROVIDER-ID	PIC X(25)	Loop 2010AA-NM109	Billing provider identifier
BILLING-PROVIDER-LAST-NAME	PIC X(20)	Loop 2010AA-NM103	Billing provider last name
BILLING-PROVIDER-FIRST-NAME	PIC X(14)	Loop 2010AA-NM104	Billing provider first name
BILLING-PROVIDER-MIDDLE-INITIAL	PIC X(01)	Loop 2010AA-NM105	Billing provider middle initial
Billing-Provider-Organization Redefines Billing-Provider-Individual			
BILLING-PROVIDER-ID	PIC X(25)	Loop 2010AA-NM109	Billing provider identifier
BILLING-PROVIDER-NAME	PIC X(35)	Loop 2010AA-NM103	Billing provider organization name
Pay-To-Provider-Data-Area Note: Pay To Provider Individual is used if loop 2010AB-NM102 = 1 (person), Pay To Provider Organization is used if loop 2010AB-NM102 = 2 (non-person entity)			
Pay-To-Provider-Individual			
PAY-TO-PROVIDER-NBR	PIC X(25)	Loop 2010AB-NM109	Pay to provider identifier
PAY-TO-PROVIDER-LAST-NAME	PIC X(20)	Loop 2010AB-NM103	Pay to provider last name
PAY-TO-PROVIDER-FIRST-NAME	PIC X(14)	Loop 2010AB-NM104	Pay to provider first name
PAY-TO-PROVIDER-MIDDLE-INITIAL	PIC X(01)	Loop 2010AB-NM105	Pay to provider middle initial
Pay-To-Provider-Organization Redefines Pay-To-Provider-Individual			
PAY-TO-PROVIDER-NBR	PIC X(25)	Loop 2010AB-NM109	Pay to provider identifier

Data Element	Picture	Source	Description
PAY-TO-PROVIDER-NAME	PIC X(35)	Loop 2010AB-NM103	Pay to provider organization name
Rendering-Provider-Data-Area Note: Rendering Provider Individual is used if loop 2310B-NM102 = 1 (person), Rendering Provider Organization is used if loop 2310B-NM102 = 2 (non-person entity)			
Rendering-Provider-Individual			
RENDERING-PROVIDER-ID	PIC X(25)	Loop 2310B-NM109	Rendering provider identifier
RENDERING-PROVIDER-LAST-NAME	PIC X(20)	Loop 2310B-NM103	Rendering provider last name
RENDERING-PROVIDER-FIRST-NAME	PIC X(14)	Loop 2310B-NM104	Rendering provider first name
RENDERING-PROVIDER-MIDDLE-INITIAL	PIC X(01)	Loop 2310B-NM105	Rendering provider middle initial
Rendering-Provider-Organization Redefines Rendering-Provider-Individual			
RENDERING-PROVIDER-ID	PIC X(25)	Loop 2310B-NM109	Rendering provider identifier
RENDERING-PROVIDER-NAME	PIC X(35)	Loop 2310B-NM103	Rendering provider organization name
Subscriber-Data-Area Note: Subscriber Individual is used if loop 2010BA-NM102 = 1 (person), Subscriber Organization is used if loop 2010BA-NM102 = 2 (non-person entity)			
Subscriber-Individual			
SUBSCRIBER-NUMBER	PIC X(25)	Loop 2010BA-NM109	Subscriber primary identification number
SUBSCRIBER-ADDTL-NUMBER	PIC X(25)	Loop 2010BA-REF02	Subscriber supplemental identifier
SUBSCRIBER-LAST-NAME	PIC X(20)	Loop 2010BA-NM103	Subscriber last name
SUBSCRIBER-FIRST	PIC X(14)	Loop 2010BA-NM104	Subscriber first name
SUBSCRIBER-MIDDLE-INITIAL	PIC X(01)	Loop 2010BA-NM105	Subscriber middle initial
SUBSCRIBER-DATE-OF-BIRTH	PIC X(08)	Loop 2010BA-DMG02	Subscriber birthdate
FILLER	PIC X(20)		
Subscriber-Organization Redefines Subscriber-Individual			
SUBSCRIBER-NUMBER	PIC X(25)	Loop 2010BA-NM109	Subscriber primary identification number
SUBSCRIBER-ADDTL-NUMBER	PIC X(25)	Loop 2010BA-REF02	Subscriber supplemental identifier
SUBSCRIBER-ORGANIZATION-NAME	PIC X(35)	Loop 2010BA-NM103	Subscriber organization name
FILLER	PIC X(28)		
Patient-Data-Area			
PATIENT-LAST-NAME	PIC X(20)	Loop 2010CA-NM103	Patient last name
PATIENT-FIRST-NAME	PIC X(14)	Loop 2010CA-NM104	Patient first name
PATIENT-MIDDLE-INITIAL	PIC X(01)	Loop 2010CA-NM105	Patient middle initial
PATIENT-ID-NUMBER	PIC X(25)	Loop 2010CA-NM109	Patient primary identification number
PATIENT-DATE-OF-BIRTH	PIC X(08)	Loop 2010CA-DMG02	Patient birthdate

Data Element	Picture	Source	Description
PATIENT-BILL-TYPE	PIC X(03)	Loop 2300-CLM05	Facility code value (place of service)
SERVICE-FROM-DATE	PIC X(08)	Loop 2300-DTP03	Service from date
SERVICE-TO-DATE	PIC X(08)	Loop 2300-DTP03	Service to date
TOTAL-CHARGES	PIC 16(9)V99	Loop 2300-CLM02	Total claim charge amount
FILLER	PIC X(20)		
Error-Claim-Message Occurs 8 Times Indexed By CLM-ERR-INDX			
SEGMENT-POSITION	PIC 9(10)		Segment position relative to ST
HL-ID	PIC X(12)	HL01	Hierarchical identification number
LOOP-IDENTIFIER	PIC X(06)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
LOOP-REPEAT-IDENTIFIER	PIC X(04)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-IDENTIFIER	PIC X(04)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-FIELD-IDENTIFIER	PIC X(06)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-REPEAT-IDENTIFIER	PIC X(04)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
ERROR-CODE	PIC X(05)		
ERROR-CODE-SOURCE-IDENTIFIER	PIC X(01)		Valid values: S = SIG edit errors; P = Processor edit errors; E = EDIG edit errors
ERROR-DESCRIPTION-VERBIAGE	PIC X(65)		
Accept-Claim-Message Redefines Error-Claim-Message			
ACCEPT-CLAIM-MESSAGE-LINE1	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE2	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE3	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE4	PIC X(100)		
FILLER	PIC X(536)		
End of Accept-Claim-Message			
FILLER	PIC X(187)		
RESPONSE-FORMAT-VERSION-CODE	PIC X(04)		EDIG assigned; Value 0100 (01.00 Version 1)
END of Layout			

Claim Response Layout – Dental

Data Element	Picture	Source	Description
MCN	PIC X(100)		
MCN-Data Redefines MCN			
PROCESSOR-ID	PIC X(09)	ISA08	Entity to whom EDIG is routing the claim
X12 TRANSACTION-ID	PIC X(04)	ST01	Transaction set control number, always '837'
X12 VERSION-NUMBER	PIC X(12)	GS08	Version release Identification code
SUBMITTER-ID	PIC X(10)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
BILLING-PROVIDER-ID	PIC X(12)	Loop 2010AA-NM109	First 12 characters of billing provider's EIN or SSN
SUBSCRIBER-ID	PIC X(17)	Loop 2010BA-NM109	First 17 characters of subscriber's member identification number
PATIENT-CONTROL-NUMBER	PIC X(20)	Loop 2300-CLM01	Patient account number
ENTRY-DATE	PIC X(08)		Date EDIG retrieved data from trading partner's mailbox
ENTRY-TIME	PIC X(08)		Time EDIG retrieved data from trading partner's mailbox
End of MCN-Data			
ACCEPT/REJECT-INDICATOR	PIC X(01)		Generated by EDIG to indicate claim forwarded to processor (A) or rejected back to trading partner with errors (R)
TEST/PROD-INDICATOR	PIC X(01)	ISA15	Code to indicate production (P) or test (T) claim
GROUP-CONTROL-NUMBER	PIC X(09)	GS06	Group control number assigned by the trading partner
PROCESSOR-ASSIGNED-CLAIM-NUMBER	PIC X(20)		Available when provided by processor
FILLER-RESERVED	PIC X(20)		
Reference/Trace-Number		**Occurs 4 Times**	
REFERENCE/TRACE-NBR-INDICATOR	PIC X(01)		
EDIG-ASSIGNED-NBR	VALUE E		Assigned by EDIG
SUBMITTER-ASSIGNED-NBR	VALUE S		Assigned by trading partner
RECEIVER-ASSIGNED-NBR	VALUE R		Assigned by third party process
REFERENCE/TRACE-NUMBER	PIC X(30)	Loop 2300-REF02	Value-added network trace number assigned by sender (claim number)
Submitter-Data-Area Note: Submitter Individual is used if Loop 1000A-NM102 = 1 (person), Submitter Organization is used if Loop 1000A-NM102 = 2 (non-person entity)			
Submitter-Individual			
SUBMITTER-ID	PIC X(25)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
SUBMITTER-LAST-NAME	PIC X(20)	Loop 1000A-NM103	Trading partner last name
SUBMITTER-FIRST-NAME	PIC X(14)	Loop 1000A-NM104	Trading partner first name
SUBMITTER-MIDDLE-INITIAL	PIC X(01)	Loop 1000A-NM105	Trading partner middle initial
Submitter-Organization Redefines Submitter-Individual			
SUBMITTER-ID	PIC X(25)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
SUBMITTER-ORGANIZATION-NAME	PIC X(35)	Loop 1000A-NM103	Trading partner organization name

Data Element	Picture	Source	Description
Payer-Data-Area			
PAYER-ID-CODE	PIC X(25)	Loop 2010BB-NM109	Payer identifier
PAYER-NAME	PIC X(35)	Loop 2010BB-NM103	Payer name
Receiver-Data-Area			
RECEIVER-ID	PIC X(25)	Loop 1000B-NM109	Receiver primary identifier
RECEIVER-NAME	PIC X(35)	Loop 1000B-NM103	Receiver name
Billing-Provider-Data-Area Note: Billing Provider Individual is used if Loop 2010AA-NM102 = 1 (person), Billing-Provider-Organization is used if Loop 2010AA-NM102 = 2 (non-person entity)			
Billing-Provider-Individual			
BILLING-PROVIDER-ID	PIC X(25)	Loop 2010AA-NM109	Billing provider identifier
BILLING-PROVIDER-LAST-NAME	PIC X(20)	Loop 2010AA-NM103	Billing provider last name
BILLING-PROVIDER-FIRST-NAME	PIC X(14)	Loop 2010AA-NM104	Billing provider first name
BILLING-PROVIDER-MIDDLE-INITIAL	PIC X(01)	Loop 2010AA-NM105	Billing provider middle initial
Billing-Provider-Organization Redefines Billing-Provider-Individual			
BILLING-PROVIDER-ID	PIC X(25)	Loop 2010AA-NM109	Billing provider identifier
BILLING-PROVIDER-NAME	PIC X(35)	Loop 2010AA-NM103	Billing provider organization name
Pay-To-Provider-Data-Area Note: Pay-To-Provider-Individual is used if Loop 2010AB-NM102 = 1 (person), Pay-To-Provider-Organization is used if Loop 2010AB-NM102 = 2 (non-person entity)			
Pay-To-Provider-Individual			
PAY-TO-PROVIDER-NBR	PIC X(25)	Loop 2010AB-NM109	Pay to provider identifier
PAY-TO-PROVIDER-LAST-NAME	PIC X(20)	Loop 2010AB-NM103	Pay to provider last name
PAY-TO-PROVIDER-FIRST-NAME	PIC X(14)	Loop 2010AB-NM104	Pay to provider first name
PAY-TO-PROVIDER-MIDDLE-INITIAL	PIC X(01)	Loop 2010AB-NM105	Pay to provider middle initial
Pay-To-Provider-Organization Redefines Pay-To-Provider-Individual			
PAY-TO-PROVIDER-NBR	PIC X(25)	Loop 2010AB-NM109	Pay to provider identifier
PAY-TO-PROVIDER-NAME	PIC X(35)	Loop 2010AB-NM103	Pay to provider organization name
Rendering-Provider-Data-Area Note: Rendering-Provider-Individual is used if Loop 2310B-NM102 = 1 (person), Rendering-Provider-Organization is used if Loop 23010B-NM102 = 2 (non-person entity)			
Rendering-Provider-Individual			
RENDERING-PROVIDER-ID	PIC X(25)	Loop 2310B-NM109	Rendering provider identifier
RENDERING-PROVIDER-LAST-NAME	PIC X(20)	Loop 2310B-NM103	Rendering provider last name
RENDERING-PROVIDER-FIRST-NAME	PIC X(14)	Loop 2310B-NM104	Rendering provider first name
RENDERING-PROVIDER-MIDDLE-INITIAL	PIC X(01)	Loop 2310B-NM105	Rendering provider middle initial

Data Element	Picture	Source	Description
Rendering-Provider-Organization Redefines Rendering-Provider-Individual			
RENDERING-PROVIDER-ID	PIC X(25)	Loop 2310B-NM109	Rendering provider identifier
RENDERING-PROVIDER-NAME	PIC X(35)	Loop 2310B-NM103	Rendering provider organization name
Subscriber-Data-Area Note: Subscriber Individual is used if Loop 2010BA-NM102 = 1 (person), Subscriber Organization is used if Loop 2010BA-NM102 = 2 (non-person entity)			
Subscriber-Individual			
SUBSCRIBER-NUMBER	PIC X(25)	Loop 2010BA-NM109	Subscriber primary identification number
SUBSCRIBER-ADDTL-NUMBER	PIC X(25)	Loop 2010BA-REF02	Subscriber supplemental identifier
SUBSCRIBER-LAST-NAME	PIC X(20)	Loop 2010BA-NM103	Subscriber last name
SUBSCRIBER-FIRST-NAME	PIC X(14)	Loop 2010BA-NM104	Subscriber first name
SUBSCRIBER-MIDDLE-INITIAL	PIC X(01)	Loop 2010BA-NM105	Subscriber middle initial
SUBSCRIBER-DATE-OF-BIRTH	PIC X(08)	Loop 2010BA-DMG02	Subscriber birthdate
FILLER	PIC X(20)		
Subscriber-Organization Redefines Subscriber-Individual			
SUBSCRIBER-NUMBER	PIC X(25)	Loop 2010BA-NM109	Subscriber primary identification number
SUBSCRIBER-ADDTL-NUMBER	PIC X(25)	Loop 2010BA-REF02	Subscriber supplemental identifier
SUBSCRIBER-ORGANIZATION-NAME	PIC X(35)	Loop 2010BA-NM103	Subscriber organization name
FILLER	PIC X(28)		
Patient-Data-Area			
PATIENT-LAST-NAME	PIC X(20)	Loop 2010CA-NM103	Patient last name
PATIENT-FIRST-NAME	PIC X(14)	Loop 2010CA-NM104	Patient first name
PATIENT-MIDDLE-INITIAL	PIC X(01)	Loop 2010CA-NM105	Patient middle initial
PATIENT-ID-NUMBER	PIC X(25)	Loop 2010CA-NM109	Patient primary identification number
PATIENT-DATE-OF-BIRTH	PIC X(08)	Loop 2010CA-DMG02	Patient birthdate
PATIENT-BILL-TYPE	PIC X(03)	Loop 2300-CLM05	Facility code value (place of service)
SERVICE-FROM-DATE	PIC X(08)	Loop 2300-DTP03	Service from date
SERVICE-TO-DATE	PIC X(08)	Loop 2300-DTP03	Service to date
TOTAL-CHARGES	PIC 16(9)V99	Loop 2300-CLM02	Total claim charge amount
FILLER	PIC X(20)		
Error-Claim-Message		**Occurs 8 Times Indexed By CLM-ERR-INDX.**	
SEGMENT-POSITION	PIC 9(10)		Segment Position Relative to ST
HL-ID	PIC X(12)	HL01	Hierarchical identification

Data Element	Picture	Source	Description
LOOP-IDENTIFIER	PIC X(06)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
LOOP-REPEAT-IDENTIFIER	PIC X(04)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-IDENTIFIER	PIC X(04)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-FIELD-IDENTIFIER	PIC X(06)		Refer to 837 Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-REPEAT-IDENTIFIER	PIC X(04)		Refer to Implementation Guide Appendix A for X12 definitions of the transactions structural components
ERROR-CODE	PIC X(05)		
ERROR-CODE-IDENTIFIER	PIC X(01)		Valid values: S = SIG edit errors; P = Processor edit errors; E = EDIG edit errors
ERROR-DESCRIPTION-VERBIAGE	PIC X(65)		
Accept-Claim-Message Redefines Error-Claim-Message			
ACCEPT-CLAIM-MESSAGE-LINE1	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE2	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE3	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE4	PIC X(100)		
FILLER	PIC X(536)		
End of Accept-Claim-Message			
FILLER	PIC X(187)		
RESPONSE FORMAT VERSION CODE	PIC X(04)		EDIG assigned; Value 0100 (01.00 Version 1)
END of Layout			

Claim Response Layout – Institutional

Data Element	Picture	Source	Description
MCN	PIC X(100)		
MCN-Data Redefines MCN			
PROCESSOR-ID	PIC X(09)	ISA08	Entity to whom EDIG is routing the claim.
X12 TRANSACTION-ID	PIC X(04)	ST01	Transaction set control number, always '837'
X12 VERSION-NUMBER	PIC X(12)	GS08	Version release identification code
SUBMITTER-ID	PIC X(10)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
BILLING-PROVIDER-ID	PIC X(12)	Loop 2010AA-NM109	First 12 characters of billing provider's EIN or SSN
SUBSCRIBER-ID	PIC X(17)	Loop 2010BA-NM109	First 17 characters of subscriber's member identification number
PATIENT-CONTROL-NUMBER	PIC X(20)	Loop 2300-CLM01	Patient account number
ENTRY-DATE	PIC X(08)		Date data retrieved from trading partner's mailbox
ENTRY-TIME	PIC X(08)		Time data retrieved from trading partner's mailbox
END of MCN-DATA			
ACCEPT/REJECT-INDICATOR	PIC X(01)		Generated by EDIG to indicate claim forwarded to processor (A) or rejected back to trading partner with errors (R)
TEST/PROD-INDICATOR	PIC X(01)	ISA15	Code to indicate production (P) or test (T) claim
GROUP-CONTROL-NUMBER	PIC X(09)	GS06	Group control number assigned by the trading partner
PROCESSOR ASSIGNED-CLAIM-NUMBER	PIC X(20)		Available when provided by processor
FILLER-RESERVED	PIC X(20)		
Reference/Trace Number		**Occurs 4 Times**	
REFERENCE/TRACE-NBR-INDICATOR	PIC X(01)		
EDIG-ASSIGNED	VALUE E		Assigned by EDIG
SUBMITTER-ASSIGNED	VALUE S		Assigned by trading partner
RECEIVER-ASSIGNED	VALUE R		Assigned by third party process
REFERENCE/TRACE-NUMBER	PIC X(30)	Loop 2300-REF02	Value-added network trace number assigned by sender (claim number)
Submitter-Data-Area Note: Submitter Individual is used if Loop 1000A-NM102 = 1 (person), Submitter Organization is used if Loop 1000A-NM102 = 2 (non-person entity)			
Submitter-Individual			
SUBMITTER-ID	PIC X(25)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
SUBMITTER-LAST-NAME	PIC X(20)	Loop 1000A-NM103	Trading partner last name
SUBMITTER-FIRST-NAME	PIC X(14)	Loop 1000A-NM104	Trading partner first name
SUBMITTER-MIDDLE-INITIAL	PIC X(01)	Loop 1000A-NM105	Trading partner middle initial
Submitter-Organization Redefines Submitter-Individual			
SUBMITTER-ID	PIC X(25)	ISA02 (GS02)	Trading Partner ID assigned by EDIG
SUBMITTER-ORGANIZATION-NAME	PIC X(35)	Loop 1000A-NM103	Trading partner organization name
Payer-Data-Area			
PAYER-ID-CODE	PIC X(25)	Loop 2010BC-NM109	Payer identifier

Data Element	Picture	Source	Description
PAYER-NAME	PIC X(35)	Loop 2010BC-NM103	Payer name
Receiver-Data-Area			
RECEIVER-ID	PIC X(25)	Loop 1000B-NM109	Receiver primary identifier
RECEIVER-NAME	PIC X(35)	Loop 1000B-NM103	Receiver name
Provider-Data-Area			
BILLING-PROVIDER-ID	PIC X(25)	Loop 2010AA-NM109	Billing provider identifier
BILLING-PROVIDER-NAME	PIC X(35)	Loop 2010AA-NM103	Billing provider name
PAY-TO-PROVIDER-NBR	PIC X(25)	Loop 2010AB-NM109	Pay to provider identifier
PAY-TO-PROVIDER-NAME	PIC X(35)	Loop 2010AB-NM103	Pay to provider name
FILLER	PIC X(60)		Not used
Subscriber-Data-Area Note: Subscriber Individual is used if Loop 2010BA-NM102 = 1 (person), Subscriber Organization is used if Loop 2010BA-NM102 = 2 (non-person entity)			
Subscriber-Individual			
SUBSCRIBER-NUMBER	PIC X(25)	Loop 2010BA-NM109	Subscriber primary identification number
SUBSCRIBER-ADDTL-NUMBER	PIC X(25)	Loop 2010BA-REF02	Subscriber supplemental identifier
SUBSCRIBER-LAST-NAME	PIC X(20)	Loop 2010BA-NM103	Subscriber last name
SUBSCRIBER-FIRST	PIC X(14)	Loop 2010BA-NM104	Subscriber first name
SUBSCRIBER-MIDDLE-INITIAL	PIC X(01)	Loop 2010BA-NM105	Subscriber middle initial
SUBSCRIBER-DATE-OF-BIRTH	PIC X(08)	Loop 2010BA-DMG02	Subscriber birthdate
FILLER	PIC X(20)		
Subscriber-Organization Redefines Subscriber-Individual			
SUBSCRIBER-NUMBER	PIC X(25)	Loop 2010BA-NM109	Subscriber primary identification number
SUBSCRIBER-ADDTL-NUMBER	PIC X(25)	Loop 2010BA-REF02	Subscriber supplemental identifier
SUBSCRIBER-ORGANIZATION-NAME	PIC X(35)	Loop 2010BA-NM103	Subscriber organization name
FILLER	PIC X(28)		
Patient-Data-Area			
PATIENT-LAST-NAME	PIC X(20)	Loop 2010CA-NM103	Patient last name
PATIENT-FIRST-NAME	PIC X(14)	Loop 2010CA-NM104	Patient first name
PATIENT-MIDDLE-INITIAL	PIC X(01)	Loop 2010CA-NM105	Patient middle initial
PATIENT-ID-NBR	PIC X(25)	Loop 2010CA-NM109	Patient primary identification number
PATIENT-DATE-OF-BIRTH	PIC X(08)	Loop 2010CA-DMG02	Patient birthdate
PATIENT-BILL-TYPE	PIC X(03)	Loop 2300-CLM05	Facility type code

Data Element	Picture	Source	Description
SERVICE-FROM-DATE	PIC X(08)	Loop 2400-DTP03	Service from date
SERVICE-TO-DATE	PIC X(08)	Loop 2400-DTP03	Service to date
TOTAL-CHARGES	PIC 16(9)V99	Loop 2300-CLM02	Total claim charge amount
FILLER	PIC X(20)		
Error-Claim-Message		**Occurs 8 Times Indexed by CLM-ERR-INDX**	
SEGMENT-POSITION	PIC 9(10)		Segment Position relative to ST
HL-ID	PIC X(12)	HL01	Hierarchical identification number
LOOP-IDENTIFIER	PIC X(06)		Refer to Implementation Guide Appendix A for X12 definitions of the transactions structural components
LOOP-REPEAT-IDENTIFIER	PIC X(04)		Refer to Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-IDENTIFIER	PIC X(04)		Refer to Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-FIELD-IDENTIFIER	PIC X(06)		Refer to Implementation Guide Appendix A for X12 definitions of the transactions structural components
SEGMENT-REPEAT-IDENTIFIER	PIC X(04)		Refer to Implementation Guide Appendix A for X12 definitions of the transactions structural components
ERROR-CODE	PIC X(05)		
ERROR-CODE-SOURCE-IDENTIFIER	PIC X(01)		Valid values: S = SIG edit errors; P = Processor edit errors; E = EDIG edit errors
ERROR-DESCRIPTION-VERBIAGE	PIC X(65)		
Accept-Claim-Message Redefines Error-Claim-Message			
ACCEPT-CLAIM-MESSAGE-LINE1	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE2	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE3	PIC X(100)		
ACCEPT-CLAIM-MESSAGE-LINE4	PIC X(100)		
FILLER	PIC X(536)		
END of Accept-Claim-Message			
FILLER	PIC X(187)		
RESPONSE FORMAT VERSION CODE	PIC X(04)		EDIG assigned; Value 0100 (01.00 Version 1)
END of Layout			

Claim Submission Summary Report

The Claims Submission Summary Report shows all claims received from a trading partner and whether they were accepted or rejected. This report may contain multiple pages. The table following the sample report includes a line-by-line description of the data items in the report.

```
mm/dd/ccyy  BCBSSC EDI GATEWAY                                                      PAGE :  xxx
hh:mm:ss    COLUMBIA, SC   29219              CLAIMS SUBMISSION SUMMARY             CYCLE : DAILY

PROCESS DATE        : mm/dd/yyyy                                                    STATUS :  xxxx
SUBMITTER ID        : XXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
GROUP CONTROL NBR   : XXXXXXXXX
BILLING PROVIDER    : XXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
PAY TO  PROVIDER    : XXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
PROCESSOR           : XXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
TRANSACTION TYPE    : 837   XXXXXXXXXXXXXXXXXX

  SUBSCRIBER       LAST        F   PATIENT             LAST       F   SERVICE DATE              REJ/  PROD/
  MEMBER ID                        CONTROL NUMBER                     FROM     TO    TOTAL CHARGES  ACC  TEST
  XXXXXXXXXXXXX  XXXXXXXXXXXXX  X  XXXXXXXXXXXXXXXXXX  XXXXXXXXXXX  X  mm/dd/yy mm/dd/yy $xxx,xxx,xxx.xx  x    x
  XXXXXXXXXXXXX  XXXXXXXXXXXXX  X  XXXXXXXXXXXXXXXXXX  XXXXXXXXXXX  X  mm/dd/yy mm/dd/yy $xxx,xxx,xxx.xx  x    x
  XXXXXXXXXXXXX  XXXXXXXXXXXXX  X  XXXXXXXXXXXXXXXXXX  XXXXXXXXXXX  X  mm/dd/yy mm/dd/yy $xxx,xxx,xxx.xx  x    x
  XXXXXXXXXXXXX  XXXXXXXXXXXXX  X  XXXXXXXXXXXXXXXXXX  XXXXXXXXXXX  X  mm/dd/yy mm/dd/yy $xxx,xxx,xxx.xx  x    x
  XXXXXXXXXXXXX  XXXXXXXXXXXXX  X  XXXXXXXXXXXXXXXXXX  XXXXXXXXXXX  X  mm/dd/yy mm/dd/yy $xxx,xxx,xxx.xx  x    x
```

Data Item	Description	Data Element
DATE (mm/dd/ccyy)	Date the report was generated	Generated by BlueCross computer system
NAME (BlueCross EDI GATEWAY)	Department within BlueCross that received your claims	Generated by BlueCross computer system
PAGE	The page number of the report	Generated by BlueCross computer system
TIME hh:mm:ss	The time of day the report was generated	Generated by BlueCross computer system
TITLE (CLAIMS SUB-MISSION SUMMARY)	Title of report	Generated by BlueCross computer system
CYCLE	How often the report is generated	Generated by BlueCross computer system
PROCESS DATE	Date EDIG retrieved data from the Trading partner's mailbox	Entry-Date
STATUS	Status of the trading partner sending claims (production or test)	Generated by BlueCross computer system
SUBMITTER ID	Trading Partner ID assigned by EDIG	Trading Partner ID
(NAME)	Trading partner's Name	Submitter-Last-Name, Submitter-First-Name, Submitter-Middle-Initial or Submitter-Organization-Name
GROUP CONTROL NBR	Group control number assigned by the Trading partner	Group-Control-Number
BILLING PROVIDER	Billing provider's EIN or SSN	Billing-Provider-ID
(BILLING PROVIDER NAME)	Billing provider's name	Billing-Provider-Last-Name, Billing-Provider-First-Name, Billing-Provider, Middle Initial or Billing Provider-Organization-Name
PAY TO PROVIDER	Pay to provider's EIN or SSN	Pay-To-Provider-NBR

Data Item	Description	Data Element
(PAY TO PROVIDER NAME)	Pay to provider's name	Pay-To-Provider-Last-Name, Pay-To-Provider-First-Name, Pay-To-Provider, Middle Initial or Pay-To- Provider-Organization-Name
PROCESSOR ID	Entity to whom EDIG is routing the claim	Processor-ID
(PROCESSOR NAME)	Name of entity to whom EDIG is routing the claim	
TRANSACTION	Transaction Set	Always '837'
TYPE	Claim Type	'Institutional', 'Professional', or 'Dental'
SUBSCRIBER MEMBER ID	Subscriber's member identification number	Subscriber-Number
LAST	Subscriber's last name	Subscriber-Last-Name or Subscriber-Organization-Name
F	Subscriber's first initial	Subscriber-First-Initial or Subscriber-Organization Name
PATIENT CONTROL NUMBER	Patient account number	Patient-Control-Number
LAST	Patient's last name	Patient-Last-Name
F	Patient's first initial	Patient-First-Initial
SERVICE DATE FROM	Service from date	Service-From-Date
SERVICE DATE TO	Service to date	Service-To-Date
TOTAL CHARGES	Total claim charge amount	Total-Charges
REJ/ACC	Generated by EDIG to indicate claim forwarded to processor or rejected back to trading partner with errors	Generated by BlueCross computer system
PROD/TEST	Code to indicate production (P) or test (T) claim	Test/Prod-Indicator

Error Claim Summary Report

The Error Claims Summary Report is generated if there are errors at the claim, batch or file level of submitted electronic claims. It provides the trading partner with specific reasons for front-end edit errors. The table following the sample report includes a line-by-line description of the data items in the report.

```
mm/dd/ccyy  BCBSSC EDI GATEWAY                                                    PAGE  :   1
hh:mm:ss    COLUMBIA, SC   29219               ERROR CLAIM SUMMARY               CYCLE : DAILY

PROCESS DATE      : xx/xx/xxxx                                                    STATUS :  xxxx
SUBMITTER ID      : XXXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
GROUP CONTROL NBR : XXXXXXXXXX
BILLING PROVIDER  : XXXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
PAY TO  PROVIDER  : XXXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
PROCESSOR         : XXXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXX
TRANSACTION/TYPE  : 837 XXXXXXXXXXXXXXX


     SUBSCRIBER          LAST        F      PATIENT          LAST      F  SERVICE DATE              REJ/  PROD/
     MEMBER ID                              CONTROL NUMBER                FROM    TO    TOTAL CHARGES  ACC   TEST


XXXXXXXXXXXXXXXXXXXX  XXXXXXXXXXXX X XXXXXXXXXXXXXXXXXX XXXXXXXXXXX X mm/dd/yy mm/dd/yy $xxx,xxx.xx    x     x

ERROR   SEGMENT     LOOP  REPEAT  SEG FIELD REPEAT ERROR
TYPE    POSITION                            CODE                      DESCRIPTION

 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 X       XXX        XXX   XXX     XXX XXX   XXX     XXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
```

Data Item	Description	Data Element
DATE (mm/dd/ccyy)	Date the report was generated	Generated by BlueCross computer system
NAME (BlueCross EDI GATEWAY)	Department within BlueCross that received your claims	Generated by BlueCross computer system
PAGE	The page number of the report	Generated by BlueCross computer system
TIME hh:mm:ss	The time of day the report was generated	Generated by BlueCross computer system
TITLE (ERROR CLAIM SUMMARY)	Title of report	Generated by BlueCross computer system
CYCLE	How often the report is generated	Generated by BlueCross computer system
STATUS	Status of the trading partner sending claims (production or test)	Generated by BlueCross computer system
PROCESS DATE	Date EDIG retrieved data from the Trading partners mailbox	Entry-Date
SUBMITTER ID	Trading Partner ID assigned by EDIG	Trading Partner ID
(NAME)	Trading partner's Name	Submitter-Last-Name, Submitter-First-Name, Submitter-Middle-Initial or Submitter-Organization-Name

Data Item	Description	Data Element
GROUP CONTROL NBR	Group control number assigned by the Trading partner	Group-Control-Number
BILLING PROVIDER	Billing provider's EIN or SSN	Billing-Provider-ID
(BILLING PROVIDER NAME)	Billing provider's name	Billing-Provider-Last-Name, Billing-Provider-First-Name, Billing-Provider, Middle Initial or Billing Provider-Organization-Name
PAY TO PROVIDER	Pay to provider's EIN or SSN	Pay-To-Provider-NBR
(PAY TO PROVIDER NAME)	Pay to provider's name	Pay-To-Provider-Last-Name, Pay-To-Provider-First-Name, Pay-To-Provider, Middle Initial or Pay-To- Provider-Organization-Name
PROCESSOR ID	Entity to whom EDIG is routing the claim	Processor-ID
(PROCESSOR NAME)	Name of entity to whom EDIG is routing the claim	
TRANSACTION	Transaction Set	Always '837'
TYPE	Claim Type	'Institutional', 'Professional' or 'Dental'
SUBSCRIBER MEMBER ID	Subscriber's member identification number	Subscriber-Number
LAST	Subscriber's last name	Subscriber-Last-Name or Subscriber-Organization-Name
F	Subscriber's first initial	Subscriber-First-Initial or Subscriber-Organization Name
PATIENT CONTROL NUMBER	Patient account number	Patient-Control-Number
LAST	Patient's last name	Patient-Last-Name
F	Patient's first initial	Patient-First-Initial
SERVICE DATE FROM	Service from date	Service-From-Date
SERVICE DATE TO	Service to date	Service-To-Date
TOTAL CHARGES	Total claim charge amount	Total-Charges
REJ/ACC	Generated by EDIG to indicate claim forwarded to processor or rejected back to trading partner with errors.	Generated by BlueCross computer system
PROD/TEST	Code to indicate production (P) or test (T) claim	Test/Prod-Indicator
ERROR TYPE	'S': SIG Edit Errors, 'P': Processor Edit Errors, 'E': EDIG Edit Errors	Error-Code-Source-Identifier
SEGMENT POSITION	Position of segment in error relative to ST	Relative segment position from ST
LOOP	Loop ID in error	Loop-Identifier
REPEAT		Loop-Repeat-Identifier
SEG	Segment in error	Segment-Identifier
FIELD	Field in error	Segment-Field-Identifier
REPEAT		Segment-Repeat-Identifier
ERROR CODE	Code identifying the error	Error-Code
DESCRIPTION	Abbreviated error message description.	Error-Description-Identifier

Additional Information for Trading Partners

1. Trading Partners should envelope (ISA-IEA) different transactions separately.

2. When preparing files for transmission to the EDI Gateway, please zip one file at a time and do not zip multiple files together.

3. Each file should contain only one transaction type (i.e. 837P, 837I, 270, etc).

4. EDIG's compliance edits reject the ISA-IEA content when any transaction within that ISA-IEA is not 100% compliant.

5. EDIG's processes will perform a case conversion (to UPPERCASE) on all EDI data.

6. If the Trading Partner opts to use a method other than an asynchronous dial-up interface, "wrapped'" data cannot be transmitted to EDI Gateway.

7. X12 transactions should not include control characters, examples such as line feed or carriage control.

8. On April 27, 2005, EDI Gateway implemented a limitation on the size of X12 270 files. These files cannot be larger than 40,000 bytes (~39K). If the file is larger than (~39k), it will reject with text message "270 file size too large, please limit to 39K or smaller." (Typically, a 19K size file will accommodate 99 eligibility inquiries.)

9. EDI Gateway and the payer's edits include HIPAA X12 Implementation Guide code set validation.

Glossary of Terms and Abbreviations

AGNS – AT& T Global Network Services

ASC X12 – ANSI Standards Committee X12 (http://www.x12.org/)

AT&T – American Telephone & Telegraph, network facilitator

eServer – BlueCross term for enterprise Server or mainframe processor

Firewall – A dedicated gateway machine with special security precautions on it, used to service outside network, especially Internet, connections and dial-in lines. The idea is to protect a cluster of more loosely administered machines hidden behind it from unauthorized access. The typical firewall is an inexpensive microprocessor-based Unix machine with no critical data, with modems and public network ports on it, but just one carefully watched connection back to the rest of the cluster. The special precautions may include threat monitoring, call-back, and even a complete iron box keyable to particular incoming IDs or activity patterns. Firewalls often run proxy gateways. (http://www.hyperdictionary.com/computer)

HIPAA – (Health Insurance Portability & Accountability Act of 1996, Public Law 104-191). Also known as the "Kennedy-Kassebaum" Act.

LU 6.2 – Logical Unit 6.2 - A type of logical unit that governs peer-to-peer SNA communications. LU6.2 supports general communication between programs in a distributed processing environment. LU6.2 is characterized by a peer relationship between session partners, efficient use of a session for multiple transactions, comprehensive end-to-end error processing and a generic application program interface consisting of structured verbs that are mapped into a product implementation. LU6.2 is used by IBM's TPF operating system. (IBM Dictionary of Computing, McGraw-Hill 1993).

MS-DOS – Acronym for D*isk Operating System*. The term *DOS* can refer to any operating system, but it is most often used as a shorthand for *MS-DOS* (**M**icro**s**oft **d**isk **o**perating **s**ystem). Originally developed by Microsoft for IBM, MS-DOS was the standard operating system for IBM-compatible personal computers. (http://www.Webopedia.com)

NDM – Network Data Mover, also known as Connect:Direct.

NT – A version of the Windows operating system. Windows NT (New Technology) is a 32-bit operating system that supports preemptive multitasking. (http://www.Webopedia.com)

SNA – (Systems Network Architecture) IBM's mainframe network standards introduced in 1974. Originally a centralized architecture with a host computer controlling many terminals, enhancements, such as APPN and APPC (LU 6.2), have adapted SNA to today's peer-to-peer communications and distributed computing environment. (www.techweb.com/encyclopedia)

TCPIP – TCP/IP is composed of two parts: TCP (Transmission Control Protocol) and IP (Internet Protocol). TCP is a connection-oriented protocol that passes its data to IP, which is connectionless. TCP sets up a connection at both ends and guarantees reliable delivery of the full message sent. TCP tests for errors and requests retransmission if necessary, because IP does not. (www.techweb.com/enclyclopedia)

TPA – Trading Partner Agreement, a contract between entities exchanging electronic transactions.

Appendix

BlueCross EDIG Trading Partner Enrollment Form
ASC X12N Transactions

Date: _____

Action Requested: ☐ New Trading Partner ID
(Check One) ☐ Change ☐ Cancel

Trading Partner Name: _____

Trading Partner ID: _____

Federal Tax ID #: _____

Type of Business: ☐ Institutional Health Care Provider ☐ Clearinghouse ☐ Billing Service
(Check One) ☐ Professional Health Care Provider ☐ Health Care Plan
☐ Retail Pharmacy ☐ Pharmacy Benefit Manager
☐ Software Vendor ☐ Other *(indicate)*: _____

Line of business: ☐ BlueCross BlueShield of South Carolina Commercial
(Check One) ☐ TRICARE

Start Date: _____ (mm/dd/ccyy)   **End Date:** _____ (mm/dd/ccyy)
(Required when canceling an account)

Compression: ☐ No Compression ☐ PKZIP ☐ UNIX
(Check One)

Protocol: ☐ NDM ☐ FTP DIALUP ☐ ASYNC DIALUP (product)_____
(Check One) ☐ Secure FTP ☐ VPN ☐ LU6.2 _____
☐ TCPIP ☐ Other *(indicate)*: _____

Service Address

Address 1: _____

Address 2:

City/State/ZIP: _____

Billing Address (If different from the Service Address)

Address 1: _____

Address 2:

City/State/ZIP: _____

Primary Contact Information

First / Last Name: _____   **E-mail:** _____

Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

Primary Technical Contact Information

First / Last Name: _____   **E-mail:** _____

Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

After Hours Technical Contact Information

First / Last Name: _____   **E-mail:** _____

Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

On Call Technical Contact Information

First / Last Name: _____   **E-mail:** _____

Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

Transaction Volume Estimates

Transmission*	Y/N**	Avg. Trans†	Transmission*	Y/N**	Avg. Trans†
ASC X12N 820 (004010X061A1)	☐	/wk	ASC X12N 835 (004010X091A1)	☐	/wk
ASC X12N 270 (004010X092A1)	☐	/wk	ASC X12N 837I (004010X096A1)	☐	/wk
ASC X12N 271 (004010X092A1)	☐	/wk	ASC X12N 837P(004010X098A1)	☐	/wk
ASC X12N 276 (004010X093A1)	☐	/wk	ASC X12N 837D (004010X097A1)	☐	/wk
ASC X12N 277 (004010X093A1)	☐	/wk	ASC X12N 837COB I (004010X096A1)	☐	/wk
ASC X12N 278 (004010X094A1)	☐	/wk	ASC X12N 837COB P (004010X098A1)	☐	/wk
ASC X12N 834 (004010X095A1)	☐	/wk	ASC X12N 837COB D (004010X097A1)	☐	/wk

* Versions supported as of 10/16/2003　　† Average number of transactions per week　　** Yes / No

If a vendor's software is used to create ASC X12N transactions submitted to the EDI Gateway, please provide the vendor's name and address below and list the transactions.

Vendor's Information

Vendor's Name: _____

Address 1: _____

Address 2: _____

City/State/ZIP: _____

Transactions: _____

Customer's Information

If your business is authorized to send or receive transactions on behalf of another entity, please provide the entity's name, federal tax identification number and national provider identifier number. **This is required for all transactions.**

Name	Federal Tax Identification Number	National Provider Identifier Number

If you are a Clearinghouse or Software Vendor and would like to be added to the Thumbs Up Certified Vendor list located on the www.SouthCarolinaBlues.com Web site, please provide the following:

Web Site Address/URL: _____

Salesperson Name/Contact Telephone: _____

If you would like to provide additional contact information, please do so below. On the description line give a brief explanation or purpose for the additional contact.

Additional Contact Information

1st Additional Contact Information
Description:_____

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____
Technical Contact Information

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

2nd Additional Contact Information
Description:_____

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____
Technical Contact Information

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

3rd Additional Contact Information
Description:_____

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____
Technical Contact Information

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

4th Additional Contact Information
Description:_____

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____
Technical Contact Information

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____

    First / Last Name: _____ **E-mail:** _____

      Telephone: ( ) ___-____ ext._____   **Fax:** ( ) ___-____